



DELTA SIGMA THETA SORORITY, INC.
A SERVICE SORORITY
JACKSON (MS) ALUMNAE CHAPTER

OFFICIAL CANDIDATE APPLICATION FORM

CANDIDATE FOR THE OFFICE OF: _____

Name: _____
Last First Maiden/Middle

Home Address: _____

City/State/Zip Code: _____

Home Telephone: () _____ **Work Telephone:** () _____

Mobile Telephone: () _____ **Primary Email:** _____

Contact Preference: Home Work Mobile Email

Occupation/Title: _____ **Employer:** _____

Public Speaking Experience:

Travel Limitations:

Have you ever been convicted of a criminal offense? No Yes (*If yes, please explain circumstances*)

List all degrees earned:

Bachelor: _____

Graduate: _____

Other: _____

Date of Initiation: _____ **Region of Initiation:** _____

Chapter of Initiation: _____ **Location:** _____

Name at Initiation: _____

List current leadership positions within Delta Sigma Theta Sorority, Inc. (locally, regionally, nationally)

List past leadership positions within Delta Sigma Theta Sorority, Inc. (locally, regionally, nationally)

List current and past leadership positions outside of Delta Sigma Theta Sorority, Inc. (locally, regionally, nationally)

National Conventions attended (Years) – Check all that apply

- | | | | |
|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> 1978 | <input type="checkbox"/> 1990 | <input type="checkbox"/> 2002 | <input type="checkbox"/> 20__ |
| <input type="checkbox"/> 1980 | <input type="checkbox"/> 1992 | <input type="checkbox"/> 2004 | <input type="checkbox"/> 20__ |
| <input type="checkbox"/> 1982 | <input type="checkbox"/> 1994 | <input type="checkbox"/> 2006 | <input type="checkbox"/> 20__ |
| <input type="checkbox"/> 1984 | <input type="checkbox"/> 1996 | <input type="checkbox"/> 2008 | <input type="checkbox"/> 20__ |
| <input type="checkbox"/> 1986 | <input type="checkbox"/> 1998 | <input type="checkbox"/> 2010 | <input type="checkbox"/> 20__ |
| <input type="checkbox"/> 1988 | <input type="checkbox"/> 2000 | <input type="checkbox"/> 2013 | <input type="checkbox"/> 20__ |

Regional Conferences attended (Years) – Check all that apply

- | | | | |
|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> 1979 | <input type="checkbox"/> 1991 | <input type="checkbox"/> 2003 | <input type="checkbox"/> 20__ |
| <input type="checkbox"/> 1981 | <input type="checkbox"/> 1993 | <input type="checkbox"/> 2005 | <input type="checkbox"/> 20__ |
| <input type="checkbox"/> 1983 | <input type="checkbox"/> 1995 | <input type="checkbox"/> 2007 | <input type="checkbox"/> 20__ |
| <input type="checkbox"/> 1985 | <input type="checkbox"/> 1997 | <input type="checkbox"/> 2009 | <input type="checkbox"/> 20__ |
| <input type="checkbox"/> 1987 | <input type="checkbox"/> 1999 | <input type="checkbox"/> 2011 | <input type="checkbox"/> 20__ |
| <input type="checkbox"/> 1989 | <input type="checkbox"/> 2001 | <input type="checkbox"/> 20__ | <input type="checkbox"/> 20__ |

STATE YOUR REASONS FOR SEEKING THIS OFFICE
(150 words or less – Use additional sheets if necessary)

Signature of Candidate: _____ Membership Number: _____ Date: _____

DO NOT WRITE IN THIS AREA. Official Nominating Committee (Use Only).

Date Application Received: _____

Application Completed? Yes No

Committee Member Verification Signature: _____