



Delta Sigma Theta Sorority, Inc. Middletown (DE) Alumnae Chapter

P.O. Box 609 Odessa, Delaware 19730-9998

Email: info.dstmiddletownde@gmail.com

December 5, 2022

Dear Parents and Guardians,

The Middletown (DE) Alumnae Chapter of Delta Sigma Theta Sorority, Inc. is excited to sponsor the Dr. Betty Shabazz Delta Academy, a national initiative of the organization. The goal of Delta Academy is to enhance or spark young women's interest in math, science, technology, and/or careers where minority women are scarcely represented, while preparing them to be leaders in the 21st Century and beyond.

Delta Academy aims to provide young ladies in the MOT area – ages 11-14 (grades 6-8) – opportunities to broaden themselves, express their curiosity, and encounter new experiences, while focusing on African American history, literacy, character development, healthy choices, and service learning. This year's program is themed "Full STEAM Ahead!"

The program will have 8 sessions on Wednesday evenings. The dates and meeting format of those sessions are as follows:

- January 11, 2023 – In Person
- January 18, 2023 – In Person
- January 25, 2023 – Virtual
- February 1, 2023 – In Person
- February 15, 2023 – In Person
- February 22, 2023 – In Person
- March 1, 2023 – Virtual
- March 8, 2023 – In Person

All in-person sessions will take place at the Odessa High School Cafeteria and Commons from 6-8 pm (dinner will be provided). There is also a mandatory virtual Guardian/Participant Orientation scheduled for **January 4, 2023** at 6:30 pm via Zoom.

If you are interested in your daughter/student becoming a part of this rewarding and exciting experience, please complete the attached application and email it to deltaacademy.dstmiddletownde@gmail.com.

All applications are due by **Wednesday, December 28, 2023**. Please ensure that your application is submitted as soon as possible since we have limited enrollment for participants.

If you have questions or concerns, please feel free to contact Shannin Danquah or Dr. Karla Johnson at deltaacademy.dstmiddletownde@gmail.com.

We look forward to your participation.



**Delta Sigma Theta Sorority, Inc.
Middletown (DE) Alumnae Chapter
Dr. Betty Shabazz Delta Academy
Student Application Form 2023
(Please Print)**



Student Name: _____

Age: _____ **Current Grade Level:** _____

Address: _____

City, State: _____ **Zip Code:** _____

Home Phone: _____ **Parent/Guardian's Cell Phone:** _____

Parent/Guardian's E-mail Address: _____

School Name: _____

Are you a previous Delta Academy participant? _____ Yes _____ No

Have you been in a mentoring program in the past? _____ Yes _____ No

Favorite School Subjects: _____

Extra-Curricular Activities (Including school, community, or church):

Your Talents/Hobbies (What you do best and/or most like to do): _____

What would you like to learn as a participant in the Dr. Betty Shabazz Delta Academy?

Student Signature and Date

Parent/Guardian's Signature and Date