

Scholarship and Awards Committee
New Orleans Delta Foundation
P.O. Box 51086
New Orleans, LA 70151-1086

February 10, 2020

Delgado Community College
Tamika Duplessis, Ph.D.
Acting Vice-Chancellor of Student Affairs &
Executive Dean City Park Campus
Executive Dean Sidney Collier Site
Delgado Community College
3727 Louisa Street
New Orleans, LA 70126

Dear Mrs. Duplessis,

The Scholarship and Awards Committee of the New Orleans Delta Foundation will award a scholarship to a deserving student enrolled at your institution in the fall semester of 2020, and we seek your assistance in helping us identify a student who meets our criteria. The student we are seeking must have completed at least 32 hours prior to the fall of 2020, and must have a grade point average of 2.7 or better on a 4.0 scale.

Additionally, the prospective recipient must demonstrate that he/she, has a good work ethic, demonstrates qualities of good citizenship and possesses a need for financial assistance that would be the incentive needed to complete his/ her course work.

Included in this communication are the stated guidelines and an application that the applicants must fill out and return by the date stated. Please feel free to duplicate the enclosures and make them available to as many students as possible. Also, you are encouraged to place the information in any university correspondence such as newsletters, e-mails and various university offices. Please be advised that failure to provide all information that has been requested and documentation by the May 15, 2019 deadline will result in the application not being considered.

Thank you for your assistance in helping us in this endeavor. We look forward to hearing from many applicants very soon. Should you have any questions, you may reach me at (504) 912-2157 or e-mail, kagwilliams@hotmail.com

Thanking You in Advance,



Kenitha Grooms-Williams, Committee Chair
NODF Scholarship and Awards Committee

New Orleans Delta Foundation

Scholarship Guidelines 2020

1. Scholarships shall be awarded to students who are enrolled at Delgado Community College, Dillard University, Southern University at New Orleans, and Xavier University of New Orleans.
2. Scholarship recipients shall have completed at least 32 hours and achieved sophomore status prior to the current fall year, and have earned a cumulative minimum Grade Point Average of 2.7 on a 4.0 Point Scale.
3. The applicant must complete the scholarship application.
The application must be typed or printed clearly in blue or black ink.
Applications can be downloaded at the following website: www.nodf.org
4. The following completed documents shall be attached to the completed scholarship application:
 - Two (2) letters of recommendation (example: advisor, instructor, administrator, etc.)
 - Official transcript of coursework completed through December 2019
 - An essay of at least 250 words stating need for financial assistance

Application packets must be completed and postmarked as soon as possible, but no later than May 15, 2020.

Application packets postmarked after May 15, 2020 will not be considered.

5. Scholarship recipients must agree to provide contact information for annual progress updates for a period of five years following the award.
6. Completed applications with all required attachments and enclosures should be mailed to:

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7. Upon completion of initial screening, selected applicants will be contacted for an interview.
8. Please note that business attire is required for the interview.

**New Orleans Delta Foundation
Scholarship Application
2020**

Name _____
Age _____ Sex _____ Classification _____ School _____ Major _____
Home Address _____ Apt# _____
Summer Address (If different) _____

Home Phone (____) _____ Cell Phone (____) _____

Email Address _____
City _____ State _____ Zip _____

Employment Information

Are you currently employed? Yes _____ No _____
Place of employment _____ Position _____
Salary \$ _____ per _____
If employed provide a copy of a check stub issued within the last three months

Financial Information

Father's / Guardian's

Name _____
Address _____
Employer _____
Other Income \$ _____ Annual Income \$ _____

Mother's / Guardian's

Name _____
Address _____
Employer _____
Other Income \$ _____ Annual Income \$ _____

Total # of dependents in household _____
Total Annual Income \$ _____

Use an additional sheet to write an essay of at least 250 words citing your financial need.

I certify that the information provided is true and correct.

Signature _____ **Date** _____