

**“DEVELOPING EFFECTIVE LEADERSHIP THROUGH ACHIEVING,  
GROWING, AND EMPOWERING MYSELF SUCCESSFULLY”**



**2011 – 2012  
Delta Sigma Theta Sorority, Inc.  
Dr. Jeanne L. Noble GEMS  
New Member Application**

**SPONSORED BY**

**Huntsville Alumnae Chapter  
Delta Sigma Theta Sorority, Inc.  
P.O. Box 3373  
Huntsville, Alabama 35810**



## **Delta GEMS**

*Huntsville Alumnae Chapter, Delta Sigma Theta Sorority, Inc.*

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### **Delta GEMS program Information**

Delta Sigma Theta Sorority, Inc. is a non-profit nationwide organization, whose purpose is to provide service and programs to promote human welfare. The Delta Growing and Empowering Myself Successfully (GEMS) program honors the 12<sup>th</sup> National President of Delta Sigma Theta Sorority, Inc., Dr. Jeanne L. Noble. Dr. Noble was a legendary pioneer in the field of education. Since the inception of Delta GEMS in 2004, the program has served as a catalyst for young African American women between the ages of 14 and 18 in grades 9 through 12 to enhance their abilities in order to achieve academic excellence. The Delta GEMS program, formerly known as Delteens, is a youth community service program of the Huntsville Alumnae Chapter, which began in the early 50's. The Delta GEMS program is an extension of the Dr. Betty Shabazz Delta Academy program, which assists young females ages 11-14 with academics and self esteem.

The goals for Delta GEMS are:

- To instill the need to excel academically
- To provide tools that enable girls to sharpen and enhance their skills to achieve high levels of academic success
- To assist girls in proper goal setting and planning for their futures, high school and beyond
- To create compassionate, caring, and community minded young women and actively involve them in service advocacy and community service opportunities

The mission of the Delta GEMS Advisory Committee is to provide young ladies with a firm structural program that will enhance their self-esteem, academic achievement, leadership skills, and cultural awareness. This, in turn, will provide them with the opportunity to develop emotionally, socially, and intellectually. It will also help young ladies be prepared to take an active role in their success as they face the challenges of the world.

The goals and objectives of the Delta GEMS Advisory Committee will be accomplished through a series of workshops and community service activities using the following frame work:

- Scholarship (Academic Excellence)
- Sisterhood (Self Esteem, Health Awareness & Leadership)
- Showing Me the Money (Financial Awareness)
- Service (Social Responsibility Obtained through Community Service)
- Infinitely Complete (The Rites of Passage)

The Delta GEMS logo is likened to a gemologist who can see, through the use of certain tools, the hidden treasure in unpolished jewels. Delta GEMS uses the polished jewels as a symbol of the facets that shine and glow within our young African-American women.

#### **Motto:**

"I believe I can succeed, and because I believe.... I have!"



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### Delta GEMS Membership

#### Criteria for Membership:

Membership into the Delta GEMS program is held once a year. The following criteria will be used to determine eligibility:

- Must be between the ages 14 - 18 entering or attending high school in the fall (grades 9 - 12)
- Must have a grade point average of 2.5 or better
- Completed application
- Typed Essay briefly describing yourself and future goals
- Copy of last year's grade report card/Transcript (*School Year 2010 - 2011*)
- One (1) letter of recommendation from one of the following:
  - ✓ Teacher or Guidance Counselor
  - ✓ Employer
  - ✓ Minister /Church Leader
  - ✓ A Sponsor /Advisor of any affiliation/organization
  - ✓ A member of a Greek sorority or fraternity
- Signed "Agreement to Participate" by applicant and parent

If accepted for membership, you must attend the induction ceremony.

#### Activities:

The following activities are included, but not limited to the organization's participation:

Presentations and Seminars  
College High School Senior Day  
Black History Observance  
Community Service  
Academic Testing Workshops, Updates, and Study Sessions  
Christmas Party  
Field Trips  
Awards Program

#### Code of Conduct:

Membership in the Delta GEMS organization requires a strong level of commitment and responsibility. All members are to adhere to a "Code of Conduct," which consists of policies and procedures that govern the organization. The Code of Conduct and sanctions for violating the Code of Conduct will be provided to every member of the program.



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### Delta GEMS Important Dates and Deadlines

#### *Selection Process:*

The selection process consists of a review of completed applications by the Delta GEMS Advisory Committee. Returned applications and recommendation letters must be postmarked no later than Wednesday, August 31, 2011. Completed applications should be sent to the following address:

Attn: Delta GEMS  
Huntsville Alumnae Chapter  
Delta Sigma Theta Sorority, Inc.  
P.O. Box 3373  
Huntsville, Alabama 35810

Applications received after the postmark date will not be reviewed.

There will be an Information Session on Saturday, September 24, 2011 for parents and applicants. The specific time and location will be provided upon acceptance into the program.

#### *If selected for membership:*

New members must participate in the new member induction ceremony currently scheduled for Sunday, September 25, 2011. The specific time and location will be provided upon acceptance into the program. Please be prepared to wear a white dress and have at least one parent/guardian or family member present to participate in the "pinning" portion of the new member induction ceremony.

If selected to become a member of the Delta GEMS program sponsored by the Huntsville Alumnae Chapter of Delta Sigma Theta Sorority, Inc., I understand and agree to the following guidelines and expectations:

- Participation in the Information Session and Ceremony Activities is mandatory.
- Involvement and participation in all Delta GEMS activities are governed under the auspices of Huntsville Alumnae Chapter of Delta Sigma Theta Sorority, Inc., Delta GEMS Code of Conduct, Officers, and Committee Chairpersons.
- Membership is strictly voluntary and requires a strong level of commitment.
- Members in good standing may continue membership until high school graduation.
- Attendance at all regularly scheduled meetings (currently the first Saturday in each month from 2:00 pm - 4:00 pm, occasional workshops/community service during the week from 6:00 pm- 8:00 pm) and other planned activities is expected.
- A 2.5 or better grade point average will be required and maintained.
- Appropriate behavior becoming of a lady should be exemplified at all times.

PLEASE KEEP THIS AND THE PRECEDING PAGES FOR YOUR OWN INFORMATION.



**Delta GEMS**

**New Member Application**

Name: \_\_\_\_\_  
Last First Middle

Age: \_\_\_\_\_ DOB: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Applicant Email Address: \_\_\_\_\_

Current School: \_\_\_\_\_

Grade Level: \_\_\_\_\_ GPA: \_\_\_\_\_

School attending in the fall: \_\_\_\_\_

Do you work part-time? Y \_\_\_\_\_ N \_\_\_\_\_

If so, where and how many hours do you work per week? \_\_\_\_\_ Hours: \_\_\_\_\_

If no, do you have plans to get a job? Y \_\_\_\_\_ N \_\_\_\_\_

Activities & Honors: Describe your involvement in extracurricular school activities and community service. Provide a brief overview of any special awards received for academics, philanthropic, athletic and/or achievements.

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**Delta GEMS**  
Huntsville Alumnae Chapter, Delta Sigma Theta Sorority, Inc.

Parent/Guardian's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Contact #: \_\_\_\_\_ Secondary Contact #: \_\_\_\_\_

Parent Email Address: \_\_\_\_\_

Is your mother a member of Delta Sigma Theta Sorority, Inc.? Y \_\_\_\_\_ N \_\_\_\_\_

Have you participated in any other Delta GEMS program? Y \_\_\_\_\_ N \_\_\_\_\_

Do you currently have a sibling participating in a Delta GEMS program? Y \_\_\_\_\_ N \_\_\_\_\_

Have you participated with Delta Academy? Y \_\_\_\_\_ N \_\_\_\_\_

Have you participated in any Delta Sigma Theta sponsored activities (i.e., Jabberwock, etc.)? Y \_\_\_ N \_\_\_

On a separate sheet in 250 words or less, briefly describe yourself and future goals. Also, tell us what you can contribute to the program and what you hope to gain from the Delta GEMS program. Your essay must be typed and submitted with your application.

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**AGREEMENT TO PARTICIPATE**

We have read and agree with all the information provided for the Delta GEMS program sponsored by Huntsville Alumnae Chapter of Delta Sigma Theta Sorority, Inc. If (our/my) child is selected for membership into the Delta GEMS program, please accept (our/my) signature(s) as (our/my) consent to have her participate. You may count on (us/me) for support and assistance whenever appropriate.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_





**PARENTAL AFFIRMATION**

I, \_\_\_\_\_, Parent/Guardian, under penalty of perjury, do hereby affirm to the Huntsville Chapter of Delta Sigma Theta Sorority, Incorporated that I authorize participation of \_\_\_\_\_, Participant Minor Child, in the Delta GEMS youth initiative program (including planned activities), and that I have the legal authority to provide my consent and authorization for such participation.

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_

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**WAIVER AND RELEASE**

I, \_\_\_\_\_, Parent/Guardian, on behalf of \_\_\_\_\_ ("Participant Minor Child") do hereby release, waive, discharge, covenant not to sue and agree to hold harmless Delta Sigma Theta Sorority, Incorporated ("Delta"), its officers, National Executive Board, employees, members, local chapters, representatives, agents, affiliates, and assigns (collectively "Releasees"), from any and all claims, demands, and actions of any and every kind directly or indirectly arising out of, or relating in any respect to Participant Minor Child's participation in the Delta GEMS program.

My waiver and release of all claims, demands, actions, and liability shall include without limitation, any injury, illness, death, property damage or loss to the Participant Minor Child, which may be caused by any act, or failure to act, by the Releasees, unless such injury, illness, death, property damage or loss is a direct result of the willful misconduct of any Releasee.

I understand that, without limitation of the foregoing, neither Delta, nor the Program, shall be liable and each is hereby released from all claims that may arise from loss or damage to the Participant Minor Child's personal property.

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_



**MEDICAL INFORMATION**

Name: \_\_\_\_\_

Age: \_\_\_\_\_ DOB: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Hospital Preference: \_\_\_\_\_

Medications: \_\_\_\_\_

Allergies (Food/Medication/Environmental): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Other Pertinent Medical Information (severe illnesses or accidents; significant health history, conditions communicable illness, or restrictions that may affect child's participation in Delta GEMS program):

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\_\_\_\_\_

Upon review of above responses by the Delta GEMS Committee, additional medical documentation may need to be completed.



**PARTICIPATION PERMISSIONS**

**Photo Release**

I, as the parent or legal guardian, grant permission for the Huntsville Alumnae Chapter of Delta Sigma Theta Sorority, Inc. to include my daughter, \_\_\_\_\_, in pictures taken at Delta GEMS activities held throughout the year. I also give permission for the Huntsville Alumnae Chapter of Delta Sigma Theta Sorority, Inc. to publish on the Internet or media still photographs or moving images, including, if applicable, any sound recordings accompanying the images taken of my child at Delta GEMS events without payment or any consideration and without notifying me.

I understand and agree these images will become the property of the Huntsville Alumnae Chapter, which shall have complete ownership of the images. I hereby irrevocably authorized the Huntsville Alumnae Chapter to publish or distribute these images for the purpose of publicizing the Chapter's programs, including the Delta GEMS program or for any other lawful purpose. In addition, I waive the right to inspect or approve the finished product wherein my child's likeness appears. Additionally, I waive any rights to royalties or other compensation arising out of or related to the use of the images.

I hereby hold harmless any release and forever discharge the Huntsville Alumnae Chapter and any of its officers and members; Delta Sigma Theta Sorority, Incorporated; its officers; National Executive Board; employees; members; representatives; agents; and assigns from any and all claims, costs, suits, actions, judgments, and expense which my child, his/her behalf have or may have by reason of the use of the images. This release specifically includes, without limitation, a complete release and whether intentional or otherwise, that may occur or be produced in the taking of or editing of said images, unless it can be shown that such was maliciously caused, produced and published solely for the purpose of subjecting my child to conspicuous ridicule, scandal, reproach, scorn and indignity.

I hereby certify that I am the parent/guardian of \_\_\_\_\_, and do hereby give my consent without reservation to the foregoing on behalf of my child.

Parent / Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_



**Workshop Permission**

I grant my daughter, \_\_\_\_\_, permission to participate in the workshops presented to Delta GEMS. I understand that most of the workshops are listed in the Delta GEMS yearly calendar.

Parent / Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

If you have any objectionable topics, please list them and sign below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Parent / Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Field Trip Permission**

As the parent/guardian of \_\_\_\_\_, I hereby give consent for her to attend field trips with Delta GEMS sponsored by the Huntsville Alumnae Chapter of Delta Sigma Theta Sorority, Inc. My daughter and I understand that she is to comply with all rules and regulations established by all representatives of Delta Sigma Theta Sorority, Inc.

I understand that precautions will be taken to ensure my daughter's safety. I, therefore, will not hold the Huntsville Alumnae Chapter of Delta Sigma Theta Sorority, Inc. or any representatives of Delta Sigma Theta Sorority, Inc. responsible for any complication, injury, or illness experienced by my daughter.

Field trips are subject to change, and notification is at the discretion of Huntsville Alumnae Chapter of Delta Sigma Theta Sorority, Inc.

Parent / Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_