

SCHOLARSHIP APPLICATION DISCLAIMER AGREEMENT FOR DISBURSEMENT OF SCHOLARSHIP FUNDS

I, _____ (Parent/Guardian) acknowledge and understand that the scholarship awards received by the winners will only be disbursed in a payment directly to the university/college identified by the scholarship recipient, _____ (Student's Name).

A written request must be received from the scholarship recipient to disburse funds. This request must include proof of enrollment/registration, student identification number, which semester the funds need to be applied, and the name and address of the institution where the funds are to be sent. The request must be sent via email to scholarship@dstndsa.org.

Scholarship awards must be claimed by October 31, 2026. Failure to request the award will result in forfeiture of the scholarship award. No exceptions.

The North Dallas Suburban Alumnae Chapter of Delta Sigma Theta Sorority, Inc. will forward these funds to the institution upon receipt of the written request and proof of enrollment/registration. The funds will be placed in the student's account with the Financial Aid Office and/or Student Affairs Office or placed in a recognized university/college bookstore account in the student's name.

Applicants may be asked to disclose any other scholarships received prior to awards being made.

I recognize and accept these conditions for the disbursement of any scholarship award that my son or daughter may receive.

Parent/Guardian Signature: _____

Date: _____