Dear Prospective Delta GEMS:

Thank you for your interest in our esteemed program designed to assist young ladies in growing and empowering themselves successfully. The Dr. Jeanne L. Noble Delta GEMS Program is an extension of the Dr. Betty Shabazz Delta Academy Program. Delta GEMS was created to “catch the dreams” of adolescent girls aged 14-18 and/or grades 9-12. Delta GEMS provides the framework to actualize those dreams through the performance of specific tasks that develop a “CAN DO” attitude. The goals for Delta GEMS are:

* to instill the need to excel academically;
* to enhance girls skills to achieve high levels of academic success;
* to assist girls in proper goal setting and planning for their futures, including high school and beyond; and
* to create compassionate, caring, and community minded young women by actively involving them in service learning and community service opportunities.

The GEMS framework is composed of eleven major components, forming a road map for college and career planning. Topics within these components are designed to provide interactive lessons and activities that provide opportunities for self-reflection and individual growth. The components are:

The Aha! Moments

Socialization

Self-Awareness

Disaster Preparedness

Leadership Development Service Advocacy

Skills for Success

Healthy Lifestyle Habits

Financial Preparation

Financial Achievement

Educational Preparation

Career Preparation

For consideration into the Delta GEMS program, all applicants must complete the provided application, including a personal reference and essay as detailed. All application components must be received in one envelope postmarked or emailed by **September 20th, 2019**. Space is limited. Only accepted applicants into the Delta GEMS program will be notified by phone and/or email.

GEMS Member & Parent/Guardian must attend the **mandatory** Orientation at the Delta Life Center - West Ashley on **September 28th, 2019 at 10am**. Failure to attend orientation will result in GEMS Member not being able to participate this year. The Delta GEMS program is scheduled to meet once or twice per month. Thus, the remaining subsequent meetings will be held at a pre-selected meeting location and will be announced at the orientation.

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

Thank you again for your interest in Delta GEMS and we look forward to building lifetime relationships and implementing exemplary programs.

**Please mail all components of the completed application in one envelope to:**

CAC-Delta GEMS Chair

P.O. Box 20672 Charleston, SC 29413

Or scan/email to:

chsgems@gmail.com

Applications emailed or postmarked after **September 20th, 2019** will not be reviewed.

**Yvette Miller,** Chapter President

**Claire Commodore-Wheeler**, **Keal Bristow** GEMS Co-Chairs

**ELIGIBILITY REQUIREMENTS**

All participants must meet the following criteria:

☐ Entering or attending high school in the fall (grades 9-12)

☐ Submit a completed Delta GEMS application \**Only completed applications emailed or postmarked by* **September 20th, 2019** *will be reviewed.*

☐ Submit all signed forms. (Letter of Consent & Waiver form, Code of Conduct form, Emergency Medical Treatment Authorization form, and Media Release form)

☐ Submit one (1) letter of recommendation from one of the following: *\*Only for new applicants*

* Teacher or Guidance Counselor, Employer, Minister, or A Sponsor /Advisor of any affiliation/organization
* The Personal Recommendation Letter should include the following information:
  + The student’s demonstrated academic and leadership ability, comments regarding the student’s character, length of time in which the recommender has known the applicant and in what capacity and any other pertinent facts.

☐ Submit a typed essay; 250 words or less. *\*Only for new applicants*

☐ Commitment to attend at least 80% of the monthly meetings and scheduled activities, otherwise, I understand that I will be removed from the program.

* GEMS Member with any concerns, problems or cannot attend a function for any reason will contact a GEMS Committee Member.

☐ Commitment to display a positive attitude and follow the guidelines as set forth by the Delta GEMS program.

**ACTIVITIES**

The following activities may include, but are not limited to the organization’s participation:

* Teen Community Forums
* Presentations and Seminars
* Volunteer Hostesses/Ushers
* Black History Month Observance
* Community Service
* Cultural and Community Events
* Academic Workshops
* Annual Christmas Party, End of the year event and Field Trips

**DELTA GEMS Application**

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| --- | --- | --- | --- | --- | --- |
| Applicant Information | | | | | |
| Name: | | | | Address: | |
| Date of Birth: | Home Phone: | | | | Cell Phone: |
| Email Address: | Facebook: ☐ Yes ☐ No | | | | Instagram/Twitter: ☐ Yes ☐ No |
| Are you a previous Delta GEMS participant? ☐ Yes ☐ No | | | If yes, list favorite activity: | | |
| Employment Information | | | | | |
| Employer: | | | | Position: | |
| Employer Address: | | | | | How Long? |
| Hours Worked Per Week: | | | | Days Unavailable: | |
| School Information | | | | | |
| School Name: | | City: | | | Grade Level: |
| Student Involvement & Ambitions | | | | | |
| List extracurricular activities including community, church, school and organizations. Please note positions held and meeting days/times. | | | | | |
|  | | | | | |
| Please list any honors, awards, hobbies or special interest you have. | | | | | |
|  | | | | | |
| What are your goals or plans after high school? | | | | | |
|  | | | | | |
| Reference | | | | | |
| Name: | Relationship: | | | | Phone: |
|  |  | | | |  |
| Parent Information | | | | | |
| Parent/Guardian’s Name: | | | | Address: | |
| Email Address: | Cell Phone: | | | |  |
| Preferred Contact Method: | Facebook: ☐ Yes ☐ No | | | | Instagram/Twitter: ☐ Yes ☐ No |
| Is your child a previous Delta GEMS participant?  ☐ Yes ☐ No | | | | If yes, list your favorite activity: | |
| Student Essay | | | | | |
| **Respond to the following question in a typed essay not to exceed 250 words and attach to the application.** What are your career plans and what steps are you taking towards meeting them? And, how do you feel the GEMS program can help you accomplish them? | | | | | |
| Signature | | | | | |
| Signature of applicant: | | | | | Date: |