The Delta Kappa Gamma Society International Beta Beta State

Scholarship Application

Eva Phillip Curry State Scholarship Josephine E. Day Scholarship Fund

Applicant	
Address	
	Phone
School	Phone
Grade Level (s)	
Content Area (s)	

Please complete all pages of this application and attach additional pages if necessary.

PROFESSIONAL EXPERIENCE:

List your professional learning/teaching experiences, beginning with the most recent.

DELTA KAPPA GAMMA SOCIETY INTERNATIONAL ADVENTURES:

Date of Initiation List offices or responsibilities	es you have had,	into beginning with the most	_Chapter recent.
COMMUNITY INVOLVEMENT:	Briefly describe yo	ur contributions to your world.	
PROFESSIONAL GOALS: Explain how this scholarship will	help you in your pro	fession as an educator.	
Describe the courses you will be t	aking.		

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College or University you will be attending	
Date of enrollment	
Have you previously received a BETA BETA STATE Scholarship?	
If yes, which scholarship did you receive?	
In which year did you receive the scholarship?	
Describe other sources of aid available to you	
LETTERS OF RECOMMENDATION: List the two persons who w	vill be writing these.
Chapter President	
Address	
	Phone
Supervisor or Colleague	
Address	
	Phone
SIGNATURES:	
Chapter Scholarship Chairman	 Date
Chapter Scholarship Chairman	Date
Applicant	Date
Revised: November 2003	-
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