



## THE DELTA KAPPA GAMMA SOCIETY INTERNATIONAL

### MINNESOTA TAU STATE ORGANIZATION

#### NATURE AND PURPOSE OF THE GRANT

The Tau State Organization of the Delta Kappa Gamma Society International will award a \$500 Recruitment Grant to a woman who is enrolled in an accredited institution of higher education, is a junior majoring in the field of education, and planning on entering the teaching profession.

#### QUALIFICATIONS

The applicant must show evidence of a sincere desire to teach, be a junior in an accredited institution of higher education, and be recommended by a member of a Tau State Organization of the Delta Kappa Gamma Society International.

#### APPLICATION AND SELECTION PROCEDURES

The completed application forms and recommendations must be submitted to the Professional Affairs Committee Chair by **January 15, 2012**. The committee will carefully consider all applicants and award the Grant at the annual Tau State Convention/Conference in the spring. All applicants will be notified of the results.

The Grant money will be paid directly to the college or university attended.

#### APPLICATION FOR TAU STATE RECRUITMENT GRANT

Mail to: Joanne Lockner  
2035 Sunlight Ave SE  
Owatonna, MN 55060

#### PRINT IN INK OR TYPE

1. \_\_\_\_\_  
Last Name                      First Name                      Middle Name                      Telephone Number
2. \_\_\_\_\_  
Home Address                      City                      State                      Zip Code
3. \_\_\_\_\_  
School Address                      City                      State                      Zip Code
4. \_\_\_\_\_  
E mail address
5. \_\_\_\_\_  
Name of College or University Attending
6. \_\_\_\_\_  
Address of College/University Bursar's Office (Check will be sent there)







TAU STATE RECRUITMENT GRANT

RECOMMENDATION FORM

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Applicant's Last Name

First Name

**PERSONALITY CHARACTERISTICS AND RECOMMENDATIONS:** (To be completed by Departments Heads, College Professors, Classroom Teaching Supervisors, or Student Teaching Supervisor.) This completed form must be mailed directly to the committee chair:

**Joanne Lockner**

**2035 Sunlight Ave SE**

**Owatonna, MN 55060**

This form is due on or before January 15, 2012.

1. Rate the personal characteristics of the applicant by circling the appropriate word. This information will be treated in a confidential and professional manner.

**COOPERATION**      SATISFACTORY      ABOVE AVERAGE      OUTSTANDING

**RELIABILITY**      SATISFACTORY      ABOVE AVERAGE      OUTSTANDING

**LEADERSHIP**      SATISFACTORY      ABOVE AVERAGE      OUTSTANDING

**INITIATIVE**      SATISFACTORY      ABOVE AVERAGE      OUTSTANDING

2. What qualities do you feel this candidate has that will make her an outstanding teacher?

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Date

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Signature

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Title