

2020 TSO SCHOLARSHIP APPLICATION

For 3, 6, or 9 Hours Graduate Study

THE DELTA KAPPA GAMMA SOCIETY INTERNATIONAL

ALPHA STATE, TEXAS

Scholarship Year: July 1, 2020 through June 30, 2021

IMPORTANT NOTICE

Review and follow **Guidelines for 3, 6, or 9-Hour Scholarships**, as applicable. Applications that are incomplete, **unsigned**, have missing items such as letters, or are postmarked after March 1, 2020, will **not** be considered. **Proofread application carefully.**

Select One:

3 Hours

6 Hours

9 Hours

Name and address of institution planning to attend, including dates:

Personal Data

Name _____

Last

First

Middle

Maiden

Mailing Address _____

Street or Box Number

City

Zip

Telephone _____ Email _____

Home

Work

Cell

Current Professional Assignment _____

(Give level and area of work)

Delta Kappa Gamma Data

Current Chapter Name _____ Location _____ Area _____ Initiation Date (Month/Year) _____

Involvement in Delta Kappa Gamma: Dates of Offices/Committees/Projects

Society Conventions Attended, especially TSO

Educational Background/Scholarships

Name & Location of Institutions _____ Dates of Degree/Certificates _____ Dates of Study _____

Delta Kappa Gamma Scholarships Received (Chapter, State, International) and indicate year of each award

Non-Society Graduate Scholarships and/or Fellowships Received

Goals/Purpose of Study

Provide a clear statement of your goals and rationale for earning a graduate degree or certification (clearly indicate which it is), including planned date for completion; the area of study; and your post-graduate/post-certification short-term and long-term goals/plans related to the field of education.

Goals for Future TSO/DKG Involvement

Refer to the **Application Guidelines** for instructions for completing this section.

Professional Positions & Accomplishments

Positions held, including location & dates (professional, teaching, administrative)

All Honors/Recognition/Other Professional Activities, including approximate dates (especially include Society/TSO)

I have read the **Scholarship Application Guidelines** and the information included is true and complete.

SIGNATURE of Applicant

Date

SIGN & RETURN **by March 1** to: Sherri Davenport, TSO Scholarship Chair
6835 Autumn Rain Lane
Spring, TX 77379