2027 TSO MINI-GRANT APPLICATION

THE DELTA KAPPA GAMMA SOCIETY INTERNATIONAL

TEXAS STATE ORGANIZATION

Scholarship Term: July 1, 2027, through June 30, 2028

IMPORTANT NOTICE

Review and follow *Guidelines for Mini-Grant Applications*. Applications that are incomplete, **unsigned**, have missing items such as letters, or are emailed after March 1, 2027, will **not** be considered. Save opened file on computer. Use tab key to move through the form and fill in all elements. Save changes. **Proofread application carefully.**

Amount of Request_____ **(Maximum $750)**

PERSONAL DATA

Name _____
Last First Middle Maiden

Mailing Address _____
Street or Box Number City Zip

Telephone_____ Personal Email _____
Home Work Cell

Current or Former Professional Assignment_____
(Give level / area of work / location)

DELTA KAPPA GAMMA DATA

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

Past and Current Involvement in Delta Kappa Gamma: (Dates of Offices / Committees / Projects)

Society Conventions Attended, especially TSO: (Month Year / Convention Name)

EDUCATIONAL BACKGROUND/SCHOLARSHIPS

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

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

Non-Society Graduate Scholarships and/or Fellowships received.

DESCRIPTION OF THE PROFESSIONAL DEVELOPMENT ACTIVITY

Provide a clear, detailed description of the professional development activity (name, date, time span, and location) planned. Include the name of the organization sponsoring the event/activity.

GOALS/JUSTIFICATION FOR THE PROFESSIONAL DEVELOPMENT ACTIVITY

Clearly explain how participation in this activity will enhance you professionally. Include specific goals you expect to achieve from participating in the program. (It is your job to convince the Scholarship Committee of the worthiness of your plan.)

BUDGET

Identify project costs by category / type of expenditure / total amount. Budget should be as specific as possible.

GOALS FOR FUTURE TSO/DKG INVOLVEMENT

Refer to the application guidelines for instructions for completing this section.

PROFESSIONAL POSITIONS AND ACCOMPLISHMENTS

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

☐ I have read the Mini-Grant Application Guidelines and the information included is true and complete.

SIGNATURE Applicant (*Type your name as your signature.)* DATE

Email completed application to: tsoscholarshipdkg@gmail.com