

2021 TSO FALL MINI-GRANT APPLICATION

THE DELTA KAPPA GAMMA SOCIETY INTERNATIONAL

TEXAS STATE ORGANIZATION

Scholarship Term: July 1, 2021 through June 30, 2022

IMPORTANT NOTICE

Review and follow *Guidelines for Fall Mini-Grant Applications*. Applications that are incomplete, **unsigned**, have missing items such as letters, or are emailed after November 1, 2021, 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 _____	_____	_____	_____	_____
_____ Home	_____ Work	_____ Cell	_____ Personal Email	_____
Current or Former Professional Assignment _____				
(Give level / area of work / location)				

DELTA KAPPA GAMMA DATA

Current Chapter Name	Location	Area	Initiation 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

Name & Location of Institutions Attended

Dates of Degree/Certificates

Dates of Study

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)

All honors/recognition/other professional activities including approximate dates (especially include Society/TSO)

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 (*mm/dd/yyyy*)