

# 2021 MAETHA GRIFFIN WEATHERBY EDUCATIONAL TRAVEL SCHOLARSHIP APPLICATION

THE DELTA KAPPA GAMMA SOCIETY INTERNATIONAL  
TEXAS STATE ORGANIZATION

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

## IMPORTANT NOTICE

Review and follow **Guidelines for Maetha Griffin Weatherby Educational Travel Scholarship**. Applications that are incomplete, have missing items such as letters, or are emailed after March 1, 2021, will **not** be considered. **Proofread application carefully.**

Amount of Request \_\_\_\_\_ (Maximum \$1,500)

## PERSONAL DATA

Name: \_\_\_\_\_  
Last Name First Name Middle Name Maiden

Mailing Address: \_\_\_\_\_  
Street or Box Number City Zip

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_  
Home Work Cell

Current Professional Assignment \_\_\_\_\_  
\*Must be an active educator (Give Level and area of work)

## DELTA KAPPA GAMMA DATA

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Current Chapter Name	Location	Area	Initiation Date (Month/Year)
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Past and Current Involvement in Delta Kappa Gamma: Dates of Offices/Committees/Projects

Society Conventions Attended, especially TSO

## **EDUCATIONAL BACKGROUND/SCHOLARSHIPS**

List below: Name and Location of Institutions, Dates of Degree Certificates, Dates of Study

List below: Delta Kappa Gamma Scholarships Received (Chapter, State, or International) and indicate year of each award.

List below: Non-Society Graduate Scholarships and/or Fellowships Received

## **DESCRIPTION OF THE EDUCATIONAL TRAVEL EXPERIENCE**

Clearly describe the educational travel event or activity (name, date, time span, location) planned. Provide the name of the sponsoring institution/organization.

## GOALS/JUSTIFICATION FOR EDUCATIONAL TRAVEL EXPERIENCE

Clearly explain the goals for this travel experience and how the new learning acquired will be incorporated into your educational setting and used to enhance curriculum and/or instruction. (It is your job to convince the Scholarships Committee of the worthiness of your plan.)

## BUDGET

Identify projected costs by category/type of expenditure and the total amount for the entire travel experience. Be as specific as possible. If approved, your stipend will not exceed 50%, or \$1,500, whichever is less, of the total projected costs.

## GOALS FOR FUTURE TSO/DKG INVOLVEMENT

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

**PROFESSIONAL POSITIONS AND ACCOMPLISHMENTS**

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

List below: Society Honors/Recognition, including approximate dates (especially include Society/TSO)

List below: Non-Society Honors/Recognition, including approximate dates

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

\_\_\_\_\_  
**TYPE NAME** in place of signature

\_\_\_\_\_  
**DATE**

Email no later than March 1, 2021 to: Sherri Davenport, TSO Scholarship Chair  
TSOscholarshipDKG@gmail.com

Revised January 25, 2021