

# 2022 MAETHA GRIFFIN WEATHERBY EDUCATIONAL TRAVEL SCHOLARSHIP APPLICATION

THE DELTA KAPPA GAMMA SOCIETY INTERNATIONAL  
TEXAS STATE ORGANIZATION

Scholarship Year: July 1, 2022 through June 30, 2023

## 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, 2022, 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

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

## **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, 2022 to: Donda Slaydon, TSO Scholarship Chair  
TSOscholarshipDKG@gmail.com

Revised December 19, 2021