THE DELTA KAPPA GAMMA SOCIETY INTERNATIONAL GAMMA STATE

BETA BETA CHAPTER SCHOLARSHIP APPLICATION FORM

|  |  |  |
| --- | --- | --- |
| I. | Name  |  |
|  | Telephone  |  |
|  | Present address  |
|  | Street | City | Zip |
| II. | MEMBERSHIP IN DELTA KAPPA GAMMA: |  |  |
|  | When and where were you initiated: | Year  |
|  | Chapter  | State  |
| How long have you been a member of Beta Beta Chapter? (Applicant must have been a member of Beta Beta Chapter for a minimum of two years at the time of the application.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |  |
| Have you been an active member continuously since initiation? |
| If the answer to the above question is “no,” explain conditions of resignation, reserve |
|  | statue, etc. |  |  |
|  |  |  |  |
| III. | CONTRIBUTION TO DELTA KAPPA GAMMA: |  |
| Offices held, chairmanships, and memberships of committees, participation in programs and other activities. |
|  | **Chapter Level**  |
|  |  |
|  | **State Level**  |
|  |  |
| IV. | IN WHAT CIVIC AND PROFESSIONAL ORGANIZATIONS ARE YOU NOW ACTIVE? |
|  | List contributions you have made to these. |  |  |

|  |  |
| --- | --- |
| V. |  PREVIOUS COLLEGE EDUCATION  |
|  | Degree | Date | Institution | Field |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  | Present Position:  |
|  | School: |  |  |  |
| Previous teaching positions: |
|  | School |  | Title of Position | Years Taught |
|  |  |  |  |  |
|  |  |  |  |  |
| VI. | PLANS FOR ADVANCED STUDY: At what institution do you plan to use this scholarship? |
|  | Institution:  |
|  | When?  |
|  | What is the end product of your study?  |
|  |  |
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|  |  |
|  |  |
|  | List any other information about dependents or other obligations: |  |
|  |  |  |
|  |  |  |
|  | Signature  |  | Date  |
|  | Signature of two (2) Beta Beta Members: |  |  |
|  |  Date  |
|  |  Date  |