

THE DELTA KAPPA GAMMA SOCIETY INTERNATIONAL
XI STATE
SCHOLARSHIP PROGRAM

A. **International** – Up to 30 scholarships for \$6,000 each are granted yearly for pursuing the doctoral degree. For more information and an application, visit the Delta Kappa Gamma website at <http://www.dkg.org>

B. **Xi State**

1. Scholarships awarded:
 - a. **Special** (Stipend of **\$3000**) for pursuing a doctoral program.
 - b. **Isabel Wheeler** (Stipend of **\$3000**) for pursuing a doctoral program.
 - c. **Maycie K. Southall** (Stipend of **\$3000**) for study beyond the Master's Degree.
 - d. **Mary Hall** (Stipend of **\$3000**) for study beyond the Bachelor's Degree.
 - e. **Evangeline Hartsook** (Stipend of **\$1250**) for study beyond the Bachelor's Degree.
 - f. **Lotty McCall** (Stipend of **\$1250**) for study beyond the Bachelor's Degree.
 - g. **Louise Oakley** (Stipend of **\$1250**) for study beyond the Bachelor's Degree.
 - h. **Eleanor Osteen** (Stipend of **\$1250**) for study beyond the Bachelor's Degree.
2. Eligibility:
 - a. All applicants must have been members of a Xi State chapter for at least **three** calendar years.
 - b. Service to Delta Kappa Gamma is an important criterion in the selection of a recipient.
 - c. Regular attendance at chapter meeting and activities and convention participation at all levels of the society shall be considered
 - d. Former recipients of a major scholarship (\$3,000) may not reapply.

C. **Application Packet Requirements**

1. Submit the **original and six copies** of the application packet. Each packet must include the following:
 - a. The application form with an attached, original photograph suitable for publication.
 - b. A written account of your proposed program plans and documentation of current enrollment. This account should include institution, major, degree, beginning date, anticipated completion date, courses completed, and professional goals to be accomplished as a result of this program.
 - c. A written account of your service to Delta Kappa Gamma. This should include offices and committee appointments at the chapter, state, and international levels, attendance at Delta Kappa Gamma conferences and conventions; participation in training sessions and legislative and/or leadership seminars; and other services rendered to Delta Kappa Gamma. Please include dates of service or participation.
 - d. The following letters of recommendation must be current within the last eighteen months:
 - i. President of your chapter.
 - ii. A supervisor or administrator familiar with your professional work.
 - iii. A university or college professor familiar with your academic work.
2. A transcript, or transcripts, of the applicant's undergraduate and graduate records are to be sent by the college or university directly to the State Scholarship Chairman (address below).
3. Due Date: All applications must be **postmarked ON or BEFORE February 1**. Please mail or ship in a manner that includes a tracking number.
4. Please send all applications to:

Dr. Inge Poole
Xi State Scholarship Committee Chairman
440 Ozier Road
Pinson TN 38366

XI STATE, DELTA KAPPA GAMMA SOCIETY INTERNATIONAL SCHOLARSHIP APPLICATION FORM

Please Print or Type

NAME _____ BIRTH _____
(First) (Middle/Maiden) (Last)

ADDRESS _____
(Street and Number) (City) (Zip)

DELTA KAPPA GAMMA CHAPTER _____ INITIATION _____
(Month and Year)

TELEPHONE: (Home) _____ (Work) _____

E-MAIL ADDRESS: _____

PRESENT POSITION:

(Institution) (Number of Years) (Grade/Subject/Area)

EDUCATIONAL CREDENTIALS:

INSTITUTION	DEGREE EARNED	YEAR
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

HAVE YOU APPLIED FOR AN INTERNATIONAL SCHOLARSHIP THIS YEAR? _____

HAVE YOU RECEIVED A XI STATE SCHOLARSHIP PRIOR TO THIS YEAR? _____

WHAT YEAR? _____ WHICH SCHOLARSHIP? _____

*Carefully follow all directions/requirements listed on the preceding information page. All required components except official transcripts must be included with application when it is received. Official transcripts must have been received before the application can be considered. **ALL components must be postmarked ON or BEFORE February 1st.** Please mail or ship your application packet in a manner that includes a tracking number.*

*Send application materials to / For questions contact
Dr. Inge Poole
731.225.5053
inge.r.poole@earthlink.net*