GUIDELINES FOR THE
DELTA KAPPA GAMMA SCHOLARSHIP APPLICATION

Eligibility:

- Applicants must be women graduates of an Alvin ISD high school OR be a current or former student at Alvin Community College
- Students must be preparing to enter the teaching profession and be college sophomores or juniors at the time of application

Award Amounts:

- Two one-time scholarships of $1000 will be awarded ($500 per semester)
- Recipients will apply the grant toward junior or senior level courses during the academic year 2015-2016.

Application Procedure:

- Complete the application form
- Attach an official copy of your college transcript with cumulative GPA
- Provide two (2) letters of recommendation
- Include a written essay on why you have chosen to become a teacher and any other information you think may be pertinent

DEADLINE FOR ALL DOCUMENTS LISTED ABOVE:

- Wednesday, April 15, 2015
- There will be no exceptions to the April 15th deadline

COMPLETED APPLICATIONS SHOULD BE RETURNED TO:

Judy Stracener
3715 Van Ness Drive
Alvin, Texas 77511
E-mail: jlstracener@yahoo.com
DELTA KAPPA GAMMA SCHOLARSHIP APPLICATION

Name: __________________________________________
   Last   Middle Initial   Last

Mailing Address: __________________________________________
   __________________________________________

Email address: __________________________________________

Phone Number: __________________________________________

Name of school and date of high school graduation:
   School: __________________________________________
   Date: __________________________________________

College/university currently attending: ________________________

College/university you are planning to attend in the fall of 2015:
   __________________________________________

You will be classified as a    junior    senior    in the fall of 2015.

Grade Point Average (GPA): __________
   (Attach most recent official transcript with cumulative grade point average.)
Beginning with high school through the present, list on-campus and off-campus activities, memberships, community/volunteer services, work experience and honors you have received. Indicate any leadership roles you have held in the activities or organizations. You may attach additional sheets of paper if you need more space than what is provided below.

I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge

Signature of scholarship applicant: ________________________________
Date: __________________

REMEMBER:

The deadline for this application is Wednesday, April 15, 2015. Applications postmarked after this date will not be considered. Review the cover page to ensure that all documents are included with your application. Incomplete applications will not be considered.

DIRECT APPLICATION QUESTIONS TO:

JUDY STRACENER (jlstracener@yahoo.com) 281-795-4112 or 281-331-9446