DELTA KAPPA GAMMA Scholarship/Grant Application Application Deadline: October 31, 2015

Name				
Address				
(Street)		(City)		
(State)	(Zip Code)	(Phone Number)	(E-mail address)	
Employer		Active DKG member? Yes No		
Interest in becomi	ng a DKG member	? Yes No		
Teaching Area _		Years as professional educator		
	e project, or colleg		bout the class project, workshop, goals for this request in relationship t	
Amount requeste	ed. (Not to exceed \$	\$300)		
Proposed Budget	t (How the money	will be spent.)		
A short report/ p	resentation needs	to be given to our m	nembers about your project in May	
Scholarships/Grar reimbursement.	nts will be awarded	as funds are available	e; documentation is needed for	

Submit completed form to Amy Ford, Leadership & Scholarship Chairperson, 1829 Old Palmer Rd. NW, Washington Court House, OH 43160