

\*\*\*Application postmark deadline: Friday, March 23, 2018

**Future Teachers Grant in Aid  
Delta Kappa Gamma  
Alpha XI Chapter Columbus, Georgia**

**APPLICATION POSTMARK DEADLINE: Friday, March 23, 2018**

Grant-in-Aid Amount: **\$600.00**

## **Requirements for Applicants**

The recipient must be a female full-time student who is either a high school senior or college/university student.

- 1. The recipient must major in education with the goal of becoming a teacher.**
2. The recipient must be of good character.
3. The recipient must have 2 teacher recommendations.
4. The recipient must have a **grade point of 3.00 or greater** on a 4.0 scale.
5. The recipient must complete an **essay** titled "Why do you want to be a teacher?"
- 6. The completed application form, essay, official transcript, and two teacher recommendations must be postmarked no later than Friday, March 23, 2018**

**Mail to the following address:**

**Marilyn Brannen  
4308 Bridgewater Circle  
Phenix City, AL 36867**

**GRANT-IN-AID APPLICATION  
DELTA KAPPA GAMMA – ALPHA XI CHAPTER  
COLUMBUS, GEORGIA**

Name \_\_\_\_\_ Date \_\_\_\_\_

Current School \_\_\_\_\_

Current Grade Point Average \_\_\_\_\_ Class Rank \_\_\_\_\_

Address \_\_\_\_\_

Email Address \_\_\_\_\_

Home phone \_\_\_\_\_ Cell phone \_\_\_\_\_

School where you will use this grant \_\_\_\_\_

Major \_\_\_\_\_

School Activities (include years): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Community: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Offices held: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**DELTA KAPPA GAMMA, ALPHA XI CHAPTER GRANT-IN-AID APPLICATION**

Please write at least one page, answering the following question:

Why do you want to be a teacher?

Signature of applicant \_\_\_\_\_ Date \_\_\_\_\_

**DELTA KAPPA GAMMA, ALPHA XI CHAPTER GRANT-IN-AID APPLICATION**

Teacher Recommendation #1

Name of applicant \_\_\_\_\_

Reference name \_\_\_\_\_

Title \_\_\_\_\_

Reference address \_\_\_\_\_

Reference telephone number \_\_\_\_\_

(Please give this form to a teacher who knows you well. The completed recommendation should be returned with your application.)

Why do you think this applicant will be an outstanding teacher?

Signature of reference \_\_\_\_\_ Date \_\_\_\_\_

**DELTA KAPPA GAMMA, ALPHA XI CHAPTER GRANT-IN-AID APPLICATION**

Teacher Recommendation #2

Name of applicant \_\_\_\_\_

Reference name \_\_\_\_\_

Title \_\_\_\_\_

Reference address \_\_\_\_\_

Reference telephone number \_\_\_\_\_

(Please give this form to a teacher who knows you well. The completed recommendation should be returned with your application.)

Why do you think this applicant will be an outstanding teacher?

Signature of reference \_\_\_\_\_ Date \_\_\_\_\_