

Delta Kappa Gamma - California's Zeta Zeta

Society International

Promoting professional and personal growth for members and excellence in education



Delta Kappa Gamma Society International - Chi State Zeta Zeta Chapter TUITION GRANT

The purpose of Zeta Zeta Chapter Scholarship Program is to provide tuition grants to students who are seeking teaching credentials. Applicants must be at least junior status enrolled in an accredited university, or active teachers working toward advanced degrees and/or credentials.

Grants are awarded on the basis of academic achievement, community service, leadership, and extent of financial need without regard to race, religion, gender, or age. Grants are from \$1000 to \$2000 each.

QUALIFICATIONS:

1. U.S. citizen or legal resident
2. Resident of Contra Costa County
3. Able to provide evidence of financial need
4. Evidence of enrollment - criteria
 - 12 units if not teaching or working
 - 8 units if working but not teaching
 - 6 units if teaching during year grant is provided

All applicants will be notified by the committee whether or not they are awarded a grant before August 1 of the current year.

Grant monies are sent to the Financial Aid Office of the university where student is enrolled after the Scholarship Committee receives official notice of enrollment. The notice must indicate the program in which the recipient is enrolled and number of units carried.

Applications must be typed or written legibly in ink. Incomplete or illegible applications will be rejected.

For further information contact:

**Delta Kappa Gamma Society International - Chi State, Zeta Zeta Chapter
TUITION GRANT APPLICATION**

**Delta Kappa Gamma, Zeta Zeta Chapter, Scholarship Chairman:
Carol J. Rowley, 7524 Northland Avenue, San Ramon, CA 94583-3714**

The application packet must be mailed to address below and consist of the following:

- Official transcripts from all post secondary institutions
- Official copy of the current class schedule
- A typed statement up to 300 words covering your career goals, community service, school experiences, financial need, and any other important information.
- Two letters of recommendation, one from a faculty member (an administrator or supervisor) and one from a community member. The letter should be from a non-relative of the applicant. Recommendation letters should be sent directly to the scholarship committee chairman listed below.
- Packets must be received by May 15 of the current year.

1. PERSONAL INFORMATION:

Name _____
(Last) (First) (Middle)

Permanent Address: _____
(Number) (Street) (Apt #)

(City) (State) (Zip)

(_____) _____ (_____) _____
(Telephone) (Cell)

(Email address) (Last 4 digits of Social Security #)

Marital Status: Single ____ Married ____ Divorced ____ Separated ____

Dependent Children: Yes ____ No ____ (If yes, how many?) ____ Ages ____

Names of addresses of parents or guardian (if applicable)

Excluding yourself, how many dependents do your parents have? ____ Ages ____

Of these dependents, how many are in college at least half time? _____

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2. Educational Information

Delta Kappa Gamma, Zeta Zeta Chapter, Scholarship Chairman:
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a. High School graduated from _____
City _____ State _____ Yr. graduated _____

b. (If applicable) Undergraduate degree earned at _____
City _____ State _____ Year _____ Major _____

c. List accredited institutions registered in or applied to: (Attach sheet if needed.)

d. Proposed Major/Advanced Degree _____

e. Expected Profession _____

f. Units earned to date _____ Required units to graduate _____ GPA _____

3. Work and Activity Information:

a. List school and/or community activities during the last 4 years. Indicate activity, offices awards time spent, etc. (Attach sheet if needed.)

b. List work experience during the last 4 years. Company, type of work, duties, time with each employer, etc.

4. Scholarships/Grants (This information will not affect your standing in selection process.)

a. List names of additional scholarship/grants for which you have applied.

b. List names and amounts of grants, if any, you currently receive.

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5. Financial Information

Estimated

**Delta Kappa Gamma, Zeta Zeta Chapter, Scholarship Chairman:
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Income	last year	this year
Your annual gross income OR If living with parents, their combined gross income	_____	_____
If married, you and spouse's combined gross income	_____	_____

Expenses	last year	this year
Tuition and Fees	_____	_____
Books and Materials	_____	_____
Living expenses (Include rent/mortgage, food, transportation, insurance, medical, auto, other	_____	_____
Miscellaneous	_____	_____
TOTAL	_____	_____

Any comments related to expenses and income _____

Additional comments (if desired)

Your signature on this application certifies that this award will help you continue your college work. If you are unable to complete your coursework please notify the committee. Consent is given to the Scholarship Committee to obtain academic, financial, or other information deemed necessary to fairly awarded the grant.

_____ optional: Please check here if you authorize publication of your name and institution as the recipient of this award.

_____ (Applicant's Signature) _____ (Date)

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