Delta Kappa Gamma International

New York State Organization DKG

Rho Chapter

EDUCATION GRANT-IN-AID

Dear Applicant:

Please submit this checklist with your application.

\_\_\_\_ I am a resident of (Circle County)

 Chenango, Delaware, Otsego

\_\_\_\_ I plan to do my student teaching \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Dates between September 2023 and June 2024)

\_\_\_\_ I have enclosed a completed and signed application form.

\_\_\_\_ I requested an Official College Transcript from the registrar on \_\_\_\_\_\_\_\_\_\_\_ and it is: (Circle one)

 (Enclosed OR Will be sent to the Chair of the Scholarship Committee)

\_\_\_\_ I have included a Needs Analysis from the Financial Aid Office with my application.

\_\_\_\_ Recommendations from two college faculty members are enclosed with my application paper or are being sent to the Chair of the Scholarship Committee

 One Recommendation is from a college faculty member in my academic area and one is a college faculty member of my choice.

 Please list names:

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

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

\_\_\_\_My letter to the scholarship committee is included with my application form.

 Circle YES or NO

Thank you for applying

Suzanne Patrick

Chair of Scholarship Committee

11189 County Hwy 23

Unadilla, NY 13849