

DELTA KAPPA GAMMA
Alpha Lambda Chapter
2022
\$500.00 Grant-in-Aid Application

Please complete the requirements and return to your high school counselor. Your counselor must POSTMARK YOUR APPLICATION by **APRIL 4, 2022**. Please give your counselor time prior to process your application. No applications will be considered if postmarked after April 4.

SEND THE FOLLOWING:

1. The Application form
2. Your Transcript (include class rank, - a minimum GPA of 2.8)
2. An Extracurricular activity and service sheet, plus awards you have received.
3. A well-organized ESSAY, not a paragraph (500 words or less)

Why do you wish to become a teacher? Include how the influence of a teacher or mentor affected your life and your decision to enter the field of education.

NAME: _____

ADDRESS: _____

TELEPHONE: _____ OR CELL _____

FATHER'S NAME **AND OCCUPATION:** _____

MOTHER'S NAME **AND OCCUPATION:** _____

NAME(S) AND AGE(S) OF BROTHERS AND SISTERS.

1. _____ 2. _____ 3. _____ 4. _____

NUMBER OF BROTHERS AND SISTERS IN COLLEGE: _____

YOUR PLANS FOR HIGHER EDUCATION: _____

YOUR INTENDED MAJOR: _____

SCHOOL YOU CURRENTLY ATTEND: _____

COUNSELOR'S NAME: _____