

**Alpha Iota Chapter of Delta Kappa Gamma
Education Award Application Instructions**

1. Complete all information on the application.
2. Enclose a copy of your high school transcript.
3. Include a copy of the letter or letters of college acceptance. If this is not available by the due date, send as soon as it is received.
4. Please include at least one sealed letter of recommendation from a teacher or other adult who is familiar with your academic achievement and abilities. Instruct your reference to sign his/her name across the seal of the envelope. Applications without a letter(s) of reference will not be considered. Please make note that you should receive the letter of recommendation no later than April 24th in order to make your deadline of May 1st.
5. Return the application, high school transcript, letter(s) of recommendation, and confirmation of college acceptance by May 1, 2009 to:

Bonnie Misch
4864 Glenfield Drive
Syracuse, NY 13215

Only completed applications with all accompanying materials received by the due date will be considered.

- 1 Application Form**
- 2 Transcript**
- 3 College Acceptance Letter(s)**
- 4 Recommendation(s)**

The Delta Kappa Gamma Society International is an honor society for women educators. The members of Alpha Iota Chapter represent most of the schools in Oswego County. This award is designed to encourage promising young women in all fields, not just education, to realize their potential for careers and leadership positions.

Alpha Iota Chapter of Delta Kappa Gamma

Educational Award Application

1. *Name* _____
2. *Address* _____
_____ *Telephone* _____
3. *Name of High School* _____
High School GPA _____ *Major (if applicable)* _____
Rank in senior class _____ *Number of students in class* _____
4. *Colleges and /or Universities to which applied. Place a check mark before names of schools to which accepted. Use additional paper if necessary.*

College Major _____
5. *Extracurricular Activities* _____

6. *Honors, Awards, Leadership positions (Offices held, etc.)* _____

7. *Interests, Hobbies* _____

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Award Recommendation Form

To be completed by the applicant:

Name _____
High School _____
Home Address _____

To be completed by the person writing the recommendation:

1. *How long and in what capacity have you known the applicant?*

2. *Indicate the strengths of the applicant.*

3. *Indicate any weaknesses of the applicant.*

4. *Please write a brief statement about the applicant. Include the potential for success in college and the ability to make significant contributions to society. Use the back of this page or attach a separate sheet for other information you feel pertinent.*

5. Name _____
Position _____
Home Address _____
Signature _____

Please seal the envelope, sign over the seal, and return to the applicant by April 24, 2009.
