

NATURE AND PURPOSE OF THE EDUCATION GRANT

The Minnesota State Organization of the Delta Kappa Gamma Society International will award a \$1000 Education Grant to a woman who is enrolled in an accredited institution of higher education, is a junior majoring in the field of education, and planning on entering the teaching profession. The DKG Society promotes women and excellence in education.

QUALIFICATIONS

The applicant must be a woman in her junior year of college pursuing a degree in education, or a female college graduate with a degree in a field other than education working on her teaching licensure. **The applicant must have one remaining year of school**. Ideally the applicant will be recommended by a Minnesota State member, but it is not absolutely necessary.

APPLICATION AND SELECTION PROCEDURES

The completed application form and recommendations must be submitted to the MN Education Grant Chair by <u>January</u> <u>15, 2025</u>. The committee will carefully consider all applicants and award the Grant on odd years at the Minnesota State Spring Convention. All applicants will be notified of the results.

The Grant money will be paid the next fall directly to the college or university attended by the applicant.

APPLICATION FOR MINNESOTA STATE EDUCATION GRANT

Mail to: Nancy Welken 12800 58th Ave N

Plymouth, MN 55442-1435

Email: njwelken@gmail.com

PRINT IN INK OR TYPE

1.						
	Last Name	First Name		Middle Name	Telephone Number	
2.						
	Home Address	(City	State	Zip Code	
3.						
	School Address		City	State	Zip Code	
4.						
	E mail address					
5.						
	Name of College or University Attending					
6.						
	Address of College/University Bursar's Office (Check will be sent there)					
7.						
	Major Field(s) of St	tudy		Minor Field(s) of St	tudy	

REQUIREMENTS FOR THE EDUCATION GRANT

8	Yes, I am currently a college/university junior.						
9	Yes, I have been admitted to the School of Education.						
10.	Yes, I have attached to this application or requested a copy of my complete transcript to be sent to the committee chair.						
11.	Yes, I have been nominated by a member of a Tau State Chapter.						
	Member's Name						
	Chapter's Name						
12.	If not nominated by a Minnesota State member, go to our state website: www.dkgmn.weebly.com Make certain it is the Minnesota (TAU State) site and answer the following questions. 1. Who is the current State President? 2. What is the mission of Delta Kappa Gamma?						
13.	List the Honors or Awards and Extra-Curricular Activities held in High School and College and/or list previous degree if working on teaching licensure.						
14.	List your employment record since high school. Place of Employment Type of Work Dates of Employment Approximate Weekly Hours						
15.	List your educational experiences as a result of course work in your college classes.						

16.	Outline your educational plans for the coming year.
	Please comment on your commitment to education, why you have chosen the teaching profession and the significance of education in today's world.
	<u>Two</u> completed recommendation forms must be submitted. They must be filled out by College Departmen Heads, College Professors, Classroom Teaching Supervisors, or Student Teaching Supervisors. They must be mailed <u>directly or emailed</u> to the committee chair to preserve confidentiality. You should provide them with the recommendation form.
	Recommendation forms will be sent from: Name Email Address
	1.
	2
19.	
	Signature of Applicant Date

Use an attached sheet if necessary for more information on any of the questions.

MN STATE DELTA KAPPA GAMMA EDUCATION GRANT

(International Society of Key Women Educators)

RECOMMENDATION FORM

	Applicant's I	Last Name	First Name				
Heads,	, College Professors, C		rvisors, or Student Teaching	be completed by College Departmen g Supervisor.) This completed form	t		
	Nancy Welken Email	12800 58 th Ave N njwelken@gmail.com		N 55442-1435			
This fo	orm is due on or before	January 15, 2025.					
1.	Rate the personal characteristics of the applicant by circling the appropriate word. This information will be treated in a confidential and professional manner.						
	COOPERATION	SATISFACTORY	ABOVE AVERAGE	OUTSTANDING			
	RELIABILITY	SATISFACTORY	ABOVE AVERAGE	OUTSTANDING			
	LEADERSHIP	SATISFACTORY	ABOVE AVERAGE	OUTSTANDING			
	INITIATIVE	SATISFACTORY	ABOVE AVERAGE	OUTSTANDING			
2.	What qualities do you	ı feel this candidate has t	hat will make her an outsta	nding teacher?			
Date	Signa	ature		Title			