

**DELTA KAPPA GAMMA SOCIETY INTERNATIONAL
BETA BETA STATE
LUCILLE HODGINS SELECTIVE RECRUITMENT GRANT
2019-20 APPLICATION REQUIREMENTS
\$1,000 grant to future educators
*Deadline: March 30, 2019***

Beta Beta State of Delta Kappa Gamma Society International is pleased to announce its 2019 - 2020 Selective Recruitment Grant Program open to any student pursuing a career in education.

Lucille Hodgins Selective Recruitment Grants of \$1,000 per grant will be awarded for the 2019 - 2020 academic year. The criteria for selection include:

1. Academic achievement
2. Leadership qualities
3. Commitment to education as a profession
4. Financial need
5. Potential for success
6. Spring 2019 and Fall 2019 enrollment in an accredited college or university (preference will be given to Hawai'i residents attending Hawai'i institutions)
7. Preference given to legal Hawai'i residents and military personnel stationed in Hawai'i
8. Past recipients are not eligible

An electronic application is available by request to Joanne Swearingen via joanneswearingen@gmail.com.

The application, an official transcript, and two (2) letters of recommendation must be postmarked on or before **March 30, 2019**. Applications postmarked after March 30, 2019 will not be considered.

Mail all required documents to:

Delta Kappa Gamma Beta Beta State Grant Committee
c/o Joanne Swearingen
1673 Bertram Street
Honolulu, Hawai'i 96816

**LUCILLE HODGINS SELECTIVE RECRUITMENT GRANT
2019-2020 APPLICATION**

Directions

1. Applications should be printed or written legibly.
2. Applications must include a separate page or separate pages in response to the Career Goals/Personal Statement section.
3. Applications must include official transcripts from the institution the applicant is currently attending and two (2) letters of recommendation written within the last two years.
4. Mail all documents to the address provided on the information page of this application. All applications must be postmarked on or before March 30, 2019.

Applicant Information

Name _____
Last First Middle Initial Maiden Name
(if applicable)

Street Address _____
City State Zip Code
Hawai'i

Phone _____ Email _____

Are you a legal resident of the State of Hawai'i or a dependent of a legal resident of the State of Hawai'i? Yes _____ No _____

Are you either an active member of the military or a dependent of an active member of the military stationed in Hawai'i? Yes _____ No _____

Educational Background

High School(s) Attended

Name	City	State/Country	Dates Attended	Graduation Date?

Post-Secondary Institutions Attended (include current post-secondary institution and institution you will be attending in 2019-20 academic year)

Name	City	State/Country	Dates Attended	Degree/Diploma?

Current Class Standing (Freshman, sophomore, etc.) _____

Expected date of graduation: (Month/Year) _____

Scholarships, Leadership, Achievements and Honors Received in High School and at Post-Secondary Institutions

List **scholarships** received for post-secondary education.

Name of Scholarship(s) Received	Year Received	Amount Received

List **leadership** positions you have held in High School and at Post-Secondary Institutions and a brief description of your accomplishments in the leadership position:

Position Held	Dates in Position	Brief Description of Accomplishments

List **academic and other achievements and honors** (e.g. Honor Roll, Dean's List, Recipient of Athletic or Community Service Award, etc.):

Name of Achievement or Honor	Year Received

Career Goals/Personal Statement

Please respond to the following questions on a **separate sheet of paper** and **attach** to application.

1. What are your career goals?
2. Why have you selected the education profession and what do you hope to contribute as an educator?
3. Briefly describe how you are currently funding your college education.
4. Why are you applying for this grant and why would you be a worthy recipient?

I have examined this application and certify that all information, including the attached personal statement is complete and accurate.

Printed name

Signature

Date