

**DELTA KAPPA GAMMA, EPSILON CHAPTER
FUTURE TEACHER SCHOLARSHIP
FOR YOUNG WOMEN**

NAME: _____ PHONE: _____

ADDRESS: _____

Name of Parent(s) or Guardian(s): _____

High School Now Attending: _____

Name of High School Guidance Counselor: _____

E-Mail Address of High School Guidance Counselor: _____

College You Will Be Attending: _____

What Do You Wish to Teach? _____

For each of the following, name the specific activity, years of high school in which you participated, and approximate time spent each week.

HIGH SCHOOL ACTIVITIES, CLUBS, SPORTS, OFFICES HELD

<u>Name of Activity</u>	<u>No. of Years</u>	<u>Hours per Week</u>
-------------------------	---------------------	-----------------------

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

COMMUNITY ACTIVITIES OR VOLUNTEER SERVICES

<u>Name of Activity</u>	<u>No. of Years</u>	<u>Hours per Week</u>
-------------------------	---------------------	-----------------------

_____	_____	_____
_____	_____	_____
_____	_____	_____

PART-TIME AND SUMMER JOBS HELD DURING HIGH SCHOOL

<u>Employer</u>	<u>Duties</u>	<u>Years</u>	<u>Hours per Week</u>
-----------------	---------------	--------------	-----------------------

On a separate sheet of paper let us know more about you, your future plans, your school activities, and why you want to be a teacher.

DEADLINE APRIL 15, 2018

CHECKLIST:

- HIGH SCHOOL TRANSCRIPT
- ONE LETTER OF REFERENCE FROM A GUIDANCE COUNSELOR, TEACHER, OR ADMINISTRATOR
- ONE LETTER OF REFERENCE FROM A PERSON WITH WHOM YOU HAVE DONE VOLUNTEER WORK
- ONE PAGE ESSAY DESCRIBING YOU, YOUR SCHOOL AND COMMUNITY ACTIVITIES, AND WHY YOU WANT TO BE A TEACHER

Student must mail DKG scholarship application to:

Ms. Kathleen Remmes
P.O. Box 103
Groveland, Massachusetts 01834-0103