

NATIONAL KAPPA KAPPA IOTA, INC. SCHOLARSHIP APPLICATION

Dear Scholarship Applicant:

Thank you for applying for a National Kappa Kappa Iota Scholarship. One of the missions of Kappa Kappa Iota is to provide monies for chapter members through regular scholarships and for non-members through educational grants. Scholarships will be awarded based on educational and professional leadership, service to Kappa Kappa Iota and other organizations, memberships and activities, and purpose/need. Scholarships will be announced during the Annual Banquet at the National Convention in June.

If you receive an award, the scholarship money will be paid after receiving verification of enrollment and payment for the courses/programs indicated on the application. Verification information (bursar's statement and/or other receipts) must be submitted to National Headquarters by June 30 of the award year (see A below).

I. INSTRUCTIONS

- A. SCHOLARSHIP AWARDS ARE FOR COURSES/PROGRAMS ENROLLED IN FROM JUNE 1 OF THE CURRENT APPLICATION YEAR THROUGH JUNE 30 OF FOLLOWING YEAR. **ONLY NEW AND ADDITIONAL COURSES/PROGRAMS WILL BE CONSIDERED FOR SCHOLARSHIP AWARDS. NO PREVIOUSLY COMPLETED COURSES/PROGRAMS ARE ELIGIBLE FOR AWARD PAYMENT.**
- B. **ONLY TYPED APPLICATIONS, ON THE CURRENT FORM, WILL BE ACCEPTED.**
- C. INDICATE THE SCHOLARSHIP FOR WHICH YOU ARE APPLYING.
- D. ANSWER ALL SECTIONS COMPLETELY AND CONCISELY.
- E. BE SURE TO OBTAIN THE REQUIRED SIGNATURES.
- F. ADDITIONAL PAGES MAY BE ADDED IF NECESSARY.
- G. THE ORIGINAL SCHOLARSHIP APPLICATION MUST BE SUBMITTED TO THE NATIONAL SCHOLARSHIP CHAIR AND SHALL BE POSTMARKED NO LATER THAN **JUNE 1**.*
- H. A COPY OF THE SCHOLARSHIP APPLICATION MUST BE SENT TO EACH MEMBER OF THE NATIONAL SCHOLARSHIP COMMITTEE, POSTMARKED NO LATER THAN **JUNE 1**.*
- I. INFORMATION CONCERNING DEADLINES FOR STATE SCHOLARSHIPS SHOULD BE OBTAINED FROM THE STATE SCHOLARSHIP CHAIR.

*(Contact your Local Chapter President or State President for mailing address information. You may also contact Kappa Kappa Iota National Headquarters at 1-800-678-0389 or by mail at 1875 E. 15th St, Tulsa, OK 74104-4610 for mailing information.)

Any instructions and/or individual scholarship requirements not followed will result in the applicant's scholarship/grant application being ineligible for award.

2023-2024 NATIONAL SCHOLARSHIP CHAIR

Laurie Konrad ~ 9606 S. 22nd Ave, Bellevue, NE 68147 ~ 402-218-2094 ~ laurie.konrad@gmail.com

COMMITTEE MEMBERS

Carol Lunsford ~ 204 Mill Village Circle, Clarksville, VA 23972 ~ 404-803-2758 ~ clunsfor@bellsouth.net

Esther Tuttle ~ 6916 Eby Avenue, Merriam, KS 66204 ~ 913-432-2880 ~ esther.tuttle@gmail.com

Tommye Jane Walker ~ 105 Walker Lane, Ripley, MS 38663 ~ 662-837-4771 ~ walker.tommye@yahoo.com

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II. INDICATE THE SCHOLARSHIP FOR WHICH YOU ARE APPLYING

NATIONAL KAPPA KAPPA IOTA SCHOLARSHIPS TO MEMBERS:

- MABLE CALDWELL SCHOLARSHIP, IVA DUGGAN SCHOLARSHIP, JEAN TERRELL SCHOLARSHIP, OR GENERAL SCHOLARSHIPS** (Complete all Sections)
- SCHOLARSHIP ESTABLISHED BY THE PAST STATE PRESIDENTS** (Complete all Sections)
- RETIRED EDUCATOR GRANT** (Complete all Sections)
- RUTH FOSTER MCCLAIN SCHOLARSHIP** awarded to doctoral candidates (Complete all Sections)
- SARA SUNDERMAN CAMPUS SCHOLARSHIP** established by the Past State Presidents (Complete all Sections)

OTHER:

- STATE SCHOLARSHIP** awarded by a State Chapter (Complete all Sections)

III. REQUIRED: EVALUATION, RECOMMENDATIONS, AND SIGNATURES

- A.** The following signatures are required: (My signature below indicates that I have read and agree to the stipulations of this award)

Applicant	Local Chapter	Date
Local President or Campus Kappa Sponsor	Local or Campus Chapter	Date
State Scholarship Chair	State Chapter	Date

- B.** Attach written and signed recommendations from the:

- (1) Local Chapter President or Campus Chapter Sponsor
- (2) State Scholarship Chair

- C.** All signatures must be handwritten.

- D.** As State President, I have reviewed the applicant's information, the Local Chapter President's (or Campus Chapter Sponsor's) comments and those of the Scholarship Chair. I, too, recommend the applicant for the scholarship or grant indicated.

STATE PRESIDENT'S SIGNATURE _____

STATE CHAPTER _____
Date _____

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IV. BIOGRAPHICAL DATA

Name

Street Address

City

State

Zip

Phone

E-mail Address

Current Professional Position/Student Classification

*Chapter

*Years of Membership

*not applicable for non-member grant applications

V. EDUCATIONAL AND PROFESSIONAL BACKGROUND (list most recent first)

A. Educational Institutions Attended Degree Earned Graduation Date Major

B. Teaching Experience Place Years

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VII. MEMBERSHIPS AND ACTIVITIES IN OTHER ORGANIZATIONS

A. Educational/Professional

<u>Name</u>	<u>Committee/Office/Activity</u>	<u>Year</u>
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B. Civic/Others

<u>Name</u>	<u>Committee/Office/Activity</u>	<u>Year</u>
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C. Honors/Awards

VIII. PURPOSES FOR APPLYING FOR THIS SCHOLARSHIP/GRANT

A. Please check one of the following:

- Working toward a degree
- Working for professional/personal enrichment
- Advancement/addition to a degree program
- Certification/recertification

Please check one of the following:

- College Freshman/Soph/Junior
- College Senior
- College Graduate Level
- College Doctoral Level
- Other (specify) _____

B. List Current Grade Point Average _____ (not applicable for Retired Educator Grant)

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C. Estimate the amount of Scholarship monies needed: _____

List all scholarship/grant monies (amount and source) that you have been awarded for this award period plus any other scholarship/grant applications that are currently pending.

<u>Scholarship/Grant</u>	<u>Amount</u>	<u>Award Pending (yes/no)</u>	<u>Date/Amount Awarded</u>
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<u>Loans</u>	<u>Amount</u>	<u>Date Received</u>	<u>Date to Begin Payoff</u>
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D. Give the college, type of program, and degree or enrichment sought. List anticipated dates of attendance for upcoming courses/programs outlined for application award period. Be specific in describing your educational goals.

E. Discuss why you are applying for this scholarship/grant or explain your special need for financial assistance.