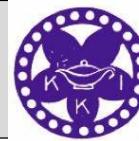




NATIONAL KAPPA KAPPA IOTA, INC. MEMBERS' SCHOLARSHIP APPLICATION



Dear Scholarship/ Grant Applicant:

Thank you for applying for a National Kappa Kappa Iota Members' Scholarship/Grant. One of the missions of Kappa Kappa Iota is to provide monies for chapter members through regular scholarships and grants. Non-members should apply on a separate educational grant application. 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/GRANT 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/GRANT 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/GRANT 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 application being ineligible for award.

2025-2026 NATIONAL SCHOLARSHIP CHAIR

Jane Otradovec, Chair, 708 West Division, Bolivar, MO 65613, janeotradovec@windstream.net 471-327-5660

COMMITTEE MEMBERS

Kay Palush 11467 Perris Blvd, Moreno Valley, CA 92557-5659 kpalush@aol.com 951-242-2709
Cindi Thompson 343 Aspen Creek Dr, Wentzville, MO 63385 thompsoncindi6@gmail.com 636-288-2078
Phyllis Thomas 20625 Creel Rd #1, Franklinton, LA 70438 phylliscthomas@gmail.com 318-554-8951
Renee Spencer PO Box 256, Carencro, LA 70520 naseyspencer63@gmail.com 337-277-8966

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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)

MARTHA WILSON SCHOLARSHIP (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/Collegiate 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/Collegiate 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 _____

Check here if applicant is a member of a Mississippi chapter. (For consideration for the Martha Wilson Scholarship.)

**NATIONAL KAPPA KAPPA IOTA, INC.
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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 _____

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

A. Educational Institutions Attended Degree Earned Graduation Date Major

B. Teaching Experience Place Years Taught Here

**NATIONAL KAPPA KAPPA IOTA, INC.
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C. Other Professional Experience

Place

Years Employed

VI. SERVICE TO KAPPA KAPPA IOTA

A. Local or Campus Chapter

1. Committees and number of years served _____

2. Chair ships and number of years served _____
3. Offices held and number of years served _____
4. Other _____

B. State Chapter

1. Number of State Conventions attended _____

2. State Committees and number of years served _____

3. State Committee Chair ships and number of and years served _____
4. State Offices held and number of years served _____
5. Other _____

C. National Chapter

1. Number of National Conventions attended _____
2. National Committees and number of years served _____

3. National Committee Chair ships and number of years served _____
4. National Offices held and number of years served _____
5. Other _____

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VII. MEMBERSHIPS AND ACTIVITIES IN OTHER ORGANIZATIONS

A. Educational/Professional

Name	Committee/Office/Activity	Years Served

B. Civic/Others

Name	Committee/Office/Activity	Years Served

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/Grant 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>

<u>Loans</u>	<u>Amount</u>	<u>Date Received</u>	<u>Date to Begin Payoff</u>

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. Please note how the college, university, or program is accredited or endorsed.

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