

The Delta Kappa Gamma Society International  
New Jersey State Organization  
The Elizabeth M. Bozearth State Scholarship



Application for State Scholarship (criteria and requirements are listed on page 3)

Name \_\_\_\_\_ Chapter \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_

Present Position \_\_\_\_\_

Address \_\_\_\_\_

**Scholarly Achievement:**

Educational Background:

Professional Experience:

Honors and Awards:

Publications:

**Contributions:**

Positions held in Delta Kappa Gamma Society: chapter/state

Positions held in other professional/community organizations:

(Please use back of sheet if more room is needed).

**Letters of Recommendation:**

1) Each applicant should ask her Chapter President to send a letter of recommendation directly to the State Chairman by the application deadline.

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2) The State Scholarship Committee has decided that two other letters of recommendation will be needed: one from a person engaged in community and/or professional affairs and one from a person who is part of the academic program of the applicant.

Please attach these two letters of recommendation to the scholarship application.

Please submit a *curriculum vitae* with this application.

Have you ever received a State or International Delta Kappa Gamma Society Scholarship?

If YES, give date: \_\_\_\_\_

**\*Terms defined**

1. Good Standing: attend meetings, dues paid
2. Participation: Office, Committee Chairperson, Committee Member, Program Participant, Other

**Verifications:**

Applicant:

I am currently doing graduate work at \_\_\_\_\_ in \_\_\_\_\_ Department. My grade point average to date is \_\_\_\_\_. Please attach a current transcript with this application.

Chapter:

I verify that (applicant's name) \_\_\_\_\_ has been a member of \_\_\_\_\_ Chapter, Delta Kappa Gamma Society since (month and year) \_\_\_\_\_ and is currently in good standing.

President's Signature \_\_\_\_\_

Date \_\_\_\_\_

**Use of Scholarship:**

Institution: \_\_\_\_\_

Address: \_\_\_\_\_

Date: \_\_\_\_\_

Purpose (explain in full):

**All materials should be mailed to:**

The State Scholarship Chair 2023-2025, Tracey Holland, 429 Onga Hat Rd., Southampton, NJ 08088 email: [Joetrac@comcast.net](mailto:Joetrac@comcast.net) - Deadline for application: December 15, 2024. No application materials accepted after this date.

## The Elizabeth M. Bozearth State Scholarship

### CRITERIA/DIRECTIONS FOR APPLYING - AMENDED 2023 AND ADOPTED 1994

#### Criteria for Selection:

1. Applicants must be members in good standing\* in the Delta Kappa Gamma Society and have held membership for three or more years prior to the application deadline
2. Applicants will be considered based on their active chapter and state participation\* in the Delta Kappa Gamma Society.
3. Applicants must be accepted in a graduate degree program in an approved institution of higher learning.
4. Applicants must meet reasonable standards of general health, personality, scholarship, professional and community involvement, and must evidence potentialities for future service to Delta Kappa Gamma Society.
5. Applicants' personal comments and references should show promise of distinction in their respective fields of study.

#### Directions for Applying:

##### Applicants must:

1. Complete the requested application form provided by the State Scholarship Chair.
2. Submit this form and two letters of recommendation to the State Scholarship Chairman by, December 15, 2024.
3. Secure two letters of recommendation one each as follows:
  - a. from a person who is involved with her in community and/or professional affairs, and
  - b. from a person who is associated with her in her chosen academic program.
4. Ask her Chapter President to submit a letter of recommendation directly to the State Scholarship Chair listing her contribution to her chapter and her participation in its activities.
5. Applicants may reapply for a scholarship yearly by submitting a new application with an updated vitae and three letters of recommendation.