

Danville Delta Kappa Chapter of Tri Kappa Scholarship

Tri Kappa is a philanthropic sorority that promotes charity, culture and education in Indiana communities. The purpose of the Delta Kappa Chapter scholarships is to recognize Danville students who demonstrate a commitment to both community service and educational pursuits.

Danville Tri Kappa will award up to \$3,000.00 in scholarship grants to any number of students who meet their criteria and are selected by the committee to have excelled in volunteer and community service while maintaining good academic standing.

Qualifications:

1. High School senior graduating from Danville Community High School or residing in Danville
2. Plans to attend an Indiana college, university, or post-secondary program
3. Strong involvement in volunteer and community service activities both in and outside of school
4. Potential to earn a degree or certification in his/her chosen field

Any relative of a current or past member or officer of Danville Tri Kappa is ineligible for this scholarship.

Students applying for a Tri Kappa Scholarship will be required to submit the following:

1. Completed Tri Kappa Scholarship application
2. A copy of your High School transcript through the last semester completed prior to the application deadline
3. A typed, double-spaced one full page essay about how you expect your education will help you to continue as well as expand your volunteer and community service activities in the future. Include ideas on how you might be able to contribute to organizations with your financial support as well as your time, talents and energy.
4. One recommendation from an adult, non-relative, familiar with your volunteer and community service activities. We encourage you to choose someone who can expand upon what you have already told us in the above application. Please include the person writing the recommendation's name, title, company, address, email and phone number.

All applications and supporting documents must be submitted by April 21, 2019 to:

Kris Dodson
Tri Kappa Scholarship Committee
P.O. Box 254
Danville, Indiana 46122
(317) 919-8012
danvilletrikappa@yahoo.com

Please contact Kris Dodson at danvilletrikappa@yahoo.com if you have any questions.

Tri Kappa Scholarship Application

PLEASE PRINT OR TYPE LEGIBLY

Name: _____

Address: _____

Phone Number: _____

Email: _____

(must be valid beyond high school graduation)

Father's Name: _____

Mother's Name: _____

College, university or institution you plan to attend: _____

Have you been accepted? Yes No

Anticipated College Major/Minor: _____

Circle One: 2-Year Program 4-Year Program

Career you plan to pursue: _____

Do you have a relative who is a current or former member of Danville Tri Kappa? Yes No

Please consider my application for the Tri Kappa Scholarship. If, for any reason, I do not attend college in the 2019-2020 academic year at an Indiana institution, I understand it is my responsibility to notify the Scholarship Committee of Danville Delta Kappa Chapter of Tri Kappa and forfeit the scholarship.

Applicant Signature

Date of Application

Please complete information below and/or attach your resume including all information.

List all **volunteer work and community service** you have provided to church, school or other community organizations during your **high school** career. Note any leadership positions you held within these activities. **Please be specific in your work performed and specify hours worked noting per week, month or year.**

Year(s)	Organization & Activity/Service Provided	Hours Per Week/ Month/ Year

List **high school and community activities** (sports, clubs, etc.) in which you have participated.

Year(s)	Organization & Activity	Hours Per Week/ Month/ Year

List any **honors and awards** you have received including year awarded. Please give a short description of the award so the committee will understand the nature of your award.

Year	Award

List any **work history** beginning with most recent. Be sure to include any routine childcare, house sitting, pet care, etc.

Employer	Position and/or Duties	Hours Per Week	Dates of Employment	Contact Name & Phone Number

List any **financial circumstances or other information** that you would like the Scholarship Committee to consider when reviewing your application.
