

**DELTA KAPPA GAMMA SOCIETY INTERNATIONAL  
HAWAI'I STATE ORGANIZATION  
EVA PHILLIP CURRY STATE SCHOLARSHIP  
2024 APPLICATION REQUIREMENTS**

*Deadline: **March 15, 2024***

The Eva Phillip Curry State Scholarship/s will be awarded for the 2024 - 2025 academic year.

The Eva Phillip Curry State Scholarship Fund is supported by annual fees and gifts from individuals and chapters. The fund provides stipends to active Delta Kappa Gamma members who request funds for special certification or professional improvement, or to fund a school, state or community project. The criteria for selection include:

1. Active membership in Hawai'i State Organization Delta Kappa Gamma Society International/Chapter
2. Positive educational impact of project, certification or professional improvement
3. Alignment with Hawai'i State Organization Strategic Action Plan
4. A plan for implementation, follow up, and measures for success

Requests may be submitted for up to **\$500**.

An electronic application is available at <https://dkghawaii.org>. This fillable PDF application requires a digital signature. Please download to use Adobe Reader to sign.

The application must be transmitted or postmarked on or before **March 15, 2024**. Applications transmitted or postmarked after **March 15, 2024** will not be considered.

Email the completed application to: [sandituitele@gmail.com](mailto:sandituitele@gmail.com)

Or mail the application to:

**Hawai'i State Scholarship Committee of DKG Society International  
c/o Sandi Tuitele  
2306 Coyne Street  
Honolulu, Hawai'i 96826-1426**

**EVA PHILLIP CURRY STATE SCHOLARSHIP  
2024 APPLICATION**

**Directions**

1. Applications should be printed or written legibly.
2. Applications must include a separate page or separate pages in response to the Project/Professional Development Plan statement section.
3. Mail or email all documents to the address provided on the information page of this application.
4. All applications must be postmarked or emailed on or before [March 15, 2024](#).

**Applicant Information**

Name \_\_\_\_\_  
Last
First
Middle Initial

Street Address \_\_\_\_\_  
City
Hawai'i  
State
Zip Code

Phone \_\_\_\_\_ Email \_\_\_\_\_

Employed at (School Name) \_\_\_\_\_ Work Phone \_\_\_\_\_

Grade Level (s) \_\_\_\_\_ Content Area (s) \_\_\_\_\_

**Delta Kappa Gamma Society International Membership Information**

Chapter Name \_\_\_\_\_ Date of Applicant's Initiation \_\_\_\_\_

List offices you have held and responsibilities you have had (begin with the most recent).

DKG Offices Held and Responsibilities Accepted	Dates

Have you previously received a Hawai'i State DKG Scholarship? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, which scholarship did you receive? \_\_\_\_\_

In which year did you receive the scholarship? \_\_\_\_\_

*Please complete all pages of this application and attach additional pages.*

**Statement of Project or Professional Development Plan**

Name of the community project you want to initiate <b>OR</b> briefly describe the program of study you plan on pursuing. (If you are taking courses, name the College or University you will be attending.)		
Project/Course Start Date (Month/Year):	Anticipated Project Completion/ Graduation Date (Month/Year):	Amount Requested (up to \$500):

On a separate sheet of paper, provide the following:

1. A description of the proposed community project and its impact on the educational community **OR** describe the professional development program you plan to pursue and how it will help you become a better educator.
2. Provide a budget for the requested funds.
3. Briefly describe the impact this project or professional improvement will have for Hawai'i State.
4. Briefly describe how this project or professional improvement aligns with the goals of the Hawai'i State Organization, DKG Strategic Action Plan
5. Briefly describe your plan for implementation and the planned follow-up for this project or professional improvement.

<i>I have examined this application and certify that all information, including the attached personal statement, is complete and accurate.</i>		
_____	_____	_____
Printed name	Signature	Date