The Delta Kappa Gamma Society International
INTERNATIONAL SOCIETY FOR KEY WOMEN EDUCATORS
DELTA KAPPA GAMMA
Missouri State Organization

MINI-GRANTS FOR WOMEN EDUCATORS (FIRST THRU FIFTH YEAR)

The Pi Chapter of Delta Kappa Gamma will award up to two mini-grants of $200.00 each to be used for classroom materials by new educators for supplies during their early teaching years. To be eligible you must be a full-time teacher in St. Louis City, Missouri and in St. Louis County, St. Charles County, Jefferson County, and Franklin County in Missouri. Committee members of Delta Kappa Gamma, Pi Chapter with origin in St. Louis County, MO will select applicants to receive the mini-grants. The qualifying persons will be notified after the **October** monthly meeting of the Pi Chapter.

Winners will be invited to attend one of the Pi Chapter meetings sharing usage of the purchased items.

Each applicant may submit only one mini-grant application.

Such applications should be e-mailed or sent regular mail to:

Delores Penton
4025 Highwillow Drive
Florissant, Missouri 63033
Email: dmpenton46@gmail.com
314-921-2116

APPLICATIONS MUST BE POSTMARKED NO LATER THAN OCTOBER 3, 2025.

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MIN-GRANT APPLICATIONS

FOR NEW WOMEN EDUCATOR PROFESSIONALS (FIRST THRU FIFTH YEAR)

1. This application must be postmarked by **October 3, 2025.**
2. This application is a **Fillable Form:** Click on each area to be filled in, or this application must be typewritten, or may be word processed using the same format. **Legible handwritten applications will be considered.**
3. **Save application with your name.** Then mail or email to the above addresses.
4. Responses to the following must be attached**.**

a. List identified need(s) this grant is designed to meet.
Click or tap here to enter text.

b. Describe the activities to be completed by the teacher receiving the grant.
Click or tap here to enter text.

c. Specifically describe any instructional materials (including prices) to be purchased for classroom use.
Click or tap here to enter text.

d. Describe expected benefits and outcomes for students.
Click or tap here to enter text.

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I.PERSONAL INFORMAION

Name: Click or tap here to enter text.

Last	First	Middle

Home Address: Click or tap here to enter text.

Street	City	Zip Code

Home or Cell Number: Click or tap here to enter text. email: Click or tap here to enter text.

II. **TEACHING INFORMATION**

School District: Click or tap here to enter text. School: Click or tap here to enter text.

School Address: Click or tap here to enter text.

Street	City	Zip Code

School Phone: Click or tap here to enter text.

Total Years in Education: Click or tap here to enter text.

Grade and/or Subject(s) Taught: Click or tap here to enter text.

Date: _____