

Kentucky Alpha Delta Kappa Scholarship Betty Riley Legacy Grant Guidelines

Purpose

This award may be given to one Kentucky sister, "a first timer," to pay the registration fee to attend a Southeast Region Conference or an International Convention. The award may be given each year at the annual state conference/convention.

Eligibility

Any Kentucky Alpha Delta Kappa member who has **not** yet attended a Southeast Region Conference or an International Convention is eligible to apply. These sisters should be active members of their local chapter. Application forms are available on the Kentucky Alpha Delta Kappa website.

Responsibility of Recipient

An application must be submitted to the State Scholarship Committee **postmarked two weeks prior to the Spring State Meeting (Convention or Conference.)** If requested by the local chapter president a postal copy will be mailed.

The recipient must be present at the state conference/convention to win the award.

The recipient shall agree to attend **Learning and General Sessions** and to submit the Scholarship Completion of Activity Report at the Fall State Meeting held following the summer Southeast Regional Conference or International Convention. Submit the completion report to the current scholarship chairman and current state president.

Money must be returned to the state treasurer if applicant does not attend Southeast Regional Conference or International Convention.

Selection of Winner

All applications will be entered into a drawing. The President will draw two names during the general meeting of the state conference/convention. First name will be the winner of the Betty Riley Legacy. The second name the President will draw will be an alternate. All rules apply to the alternate. A check will be presented to the winner at the state conference/convention.

Deadline

Postmarked 15 days prior to the Spring State Meeting (Convention or Conference.)

**Mail or Email to: Scholarship Chairman Linda Perkins, 281 Hatcher Rd, Franklin, KY 42134;
270-792-4522; perksoy@apex.net**

(Be sure the "Guidelines Page" is attached to the application.)

Kentucky Alpha Delta Kappa Scholarship

Completion of Activity Report

Name of recipient _____ Chapter _____

Check the Scholarship or Grant you received:

Name of Scholarship or Grant	✓	Completion of Activity Report Deadline
Sally Wortham Memorial Scholarship	<input type="checkbox"/>	12-month
Gene Bell Offutt Grant	<input type="checkbox"/>	3-month
Betty Riley Legacy Grant	<input type="checkbox"/>	Fall KY AΔK meeting
Sunshine Scholarship	<input type="checkbox"/>	12-month
Rosemary Weddington Leadership Enhancement Grant Southeast Regional Conference	<input type="checkbox"/>	Fall KY AΔK meeting
Rosemary Weddington Leadership Enhancement Grant International Convention	<input type="checkbox"/>	Fall KY AΔK meeting
State President & President-Elect Travel Grant	<input type="checkbox"/>	3 weeks after the event
Chapter Presidents State Meeting Expense Grant	<input type="checkbox"/>	3 weeks after the event
Classroom Grant	<input type="checkbox"/>	12-month

Scholarship Amount Received \$ _____ Today's Date _____

Starting Date _____ Completion Date _____

Summarize the convention/conference. Attach additional sheets if needed. Additionally, attach copies of receipts for expenses. Explain how this meeting either enriched your life or provided you with additional leadership skills.

DEADLINE: This report should be prepared and a copy returned via mail or email to the scholarship chairman by the deadline for that scholarship. If the report is not received by the required date, the recipient will be asked to reimburse KY Alpha Delta Kappa the total amount of the award.

Mail or Email to: **Chairman Linda Perkins, 281 Hatcher Rd, Franklin, KY 42134; 270-792-4522; perksoy@apex.net**

(Version 2025)

Kentucky Alpha Delta Kappa

Acknowledgement of Receipt

Name of recipient _____ Chapter _____

Check the name of the Scholarship or Grant Awarded:

Name of Scholarship or Grant	✓	Completion of Activity Report Deadline
Sally Wortham Memorial Scholarship		12-month
Gene Bell Offutt Grant		3-month
Betty Riley Legacy Grant		Fall KY AΔK meeting
Sunshine Scholarship		12-month
Rosemary Weddington Leadership Enhancement Grant Southeast Regional Conference		Fall KY AΔK meeting
Rosemary Weddington Leadership Enhancement Grant International Convention		Fall KY AΔK meeting
State President & President-Elect Travel Grant		3 weeks after the event
Chapter Presidents State Meeting Expense Grant		3 weeks after the event
Classroom Grant		12 -months

Grant amount received \$ _____

Date Funds Received _____

I acknowledge receipt of funds for the purpose stated above, and I affirm that I will use these funds for that purpose. If I am unable to attend the meeting, I acknowledge that I will return the funds to Kentucky Alpha Delta Kappa.

This form must be signed and returned to the State Treasurer within two weeks of receipt of funds.

Signature _____

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