Appendix

A. Connecticut President's Award

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CT President's Award
Nomination Form

Send Form to Jessica Morin 15 Gilbert Lane Hebron, CT 06248-1562
(860)205-0694

Name of Nominee:

_____

_____

Chapter _____

Please write a statement of support for your nominee. The award takes into consideration the following:

- How this sister exemplifies the purposes, principles, and ideals of AΔK
- Ways she embodies high standards of excellence in her profession and in her personal life
- Evidence of extraordinary commitment to our sorority
- Examples of how she makes (has made) a lasting difference in her teaching and in our sisterhood

Please submit this form with your letter of nomination to the state president by March 1 of the awarding year. The recipient will be announced at state convention. Thank you.

Name of Nominating Sister _____

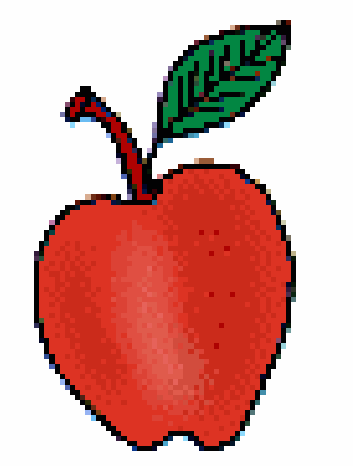
Chapter _____

Telephone _____

Email _____

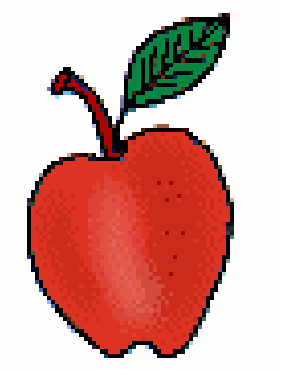
Revised: January 2019
: September 2020
:November 2022
:May 2024 A

Connecticut
Alpha Delta Kappa
GOLDEN APPLE AWARD



The purpose of this award is to encourage prompt submission of forms, reports, and dues, to recognize membership recruitment efforts, and to promote member participation at state and international functions. The award is presented annually at the state convention to the chapter that has earned the most points from May 1st to April 30th.

The president will promote this award and all opportunities for earning points through emails, newsletter, website, and at meetings.



Earn ONE point:

1 For each chapter represented at State Meeting

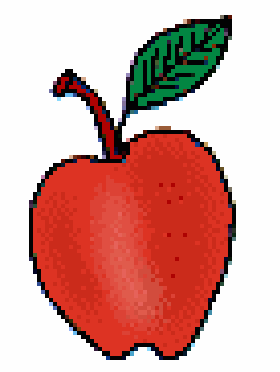
For each chapter represented at Founders' Day and State Convention

For having a state officer / chairperson present as guests at a chapter meeting (the officer / chair may not be from your own chapter)

For chapter minutes sent to the State President / or designee by last day of the month (max. 9 pts. per year)

For Fraternity Education activity DESCRIBED in your monthly chapter minutes

Bringing a prospective member to a Founders' Day



2

Earn TWO points:

For submitting a picture of your chapter executive board to the State Historian by March 1st of odd year

For submitting your chapter's program booklet with chapter goals for the even year by October 1st

For EACH AND EVERY FORM that arrives on time.

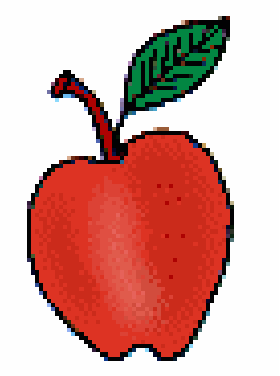
H114 due June 30th

Chapter Needs Assessment due August 31st

Alpha Delta Kappa Month Report by November 30th

Altruistic report by March 1st

C-1 Treasurer's form by July 1st



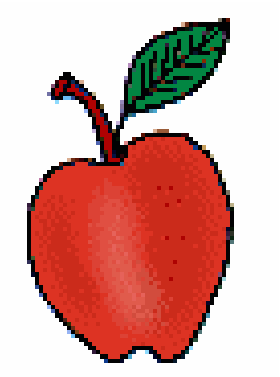
Earn THREE points:

3

For each new initiate /or member reinstated May 1 through April 30

For the chapter being represented by a registered member at an International Convention / Regional Conference (excluding ICP members)

List of Officers should be sent to State President by May 1.



Earn FIVE points:

5

For each chapter engaged in an inter-chapter meeting

For a Sister stepping up for a State Committee

For displaying chapter banner at Founders' Day and / or State Convention

For a chapter-sponsored scholarship project

For a chapter-sponsored campership project

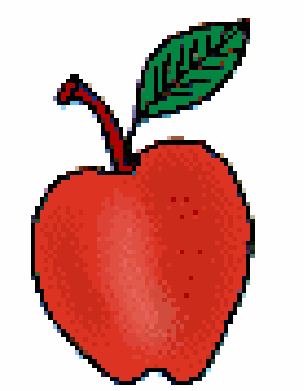
For nominating a member for the Excellence in Education Award by Nov. 1

For submitting a Distinguish Program Award for consideration

For establishing a chapter website

For reinstating a member

REVISED FEBRUARY 2018 A
REVISED MARCH 2019
REVISED NOVEMBER 2022



10

Earn TEN points:

For having the ENTIRE chapter's dues, which include Altruistic fee and Scholarship fee, in on time by January 1st to the State Treasurer

For chapter representation of 50% or more at Founders' Day or State Convention (based on the current membership roster on file with the State President.)

The 50% calculation excludes ICP members, i.e. State President, State President-Elect, and Immediate Past State President

For each new initiate in the chapter

For completing the e-postcard and submitting copies to HQ and the State Treasurer by October 15th.

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Excellence in Education Award

Excellence in Education Award has been updated on the International Website.

All information and jot-forms can be found on the International Website.

Dollars for Development

This year, Connecticut Alpha Delta Kappa is making available $500 from the scholarship fund for member grants. These grants of UP TO $100 per person may be used for professional development, classroom projects, collaborative school projects, or personal enrichment.

The grants will be awarded at two different points in the year. (See below.) A maximum of $300 may be awarded in the fall with unused funds carried over to the spring. Each year, the "Dollars for Development" amounts will be determined by the state executive board based on financial information from the scholarship chairman and records of usage.

Application Received by State Scholarship Chair	**Period during which activity occurs**	**Notification Date**
October 15	November 15-May 14	November 1
April 15	May 15 – November 14	May 1

The state scholarship chairman will e-mail applicants to acknowledge receipt of application form and summary.

Awarded recipients may only apply once in a biennium.

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Application Form - CT AK Member Grant

Name _____ Chapter _____

Address _____

Home Phone _____ E-mail _____

Amount requested $_____ (not to exceed $100)

Please submit this form and a detailed summary that includes the following information to the state scholarship chair: (If not submitted – grant will not be considered.)

1. A detailed description of the project, including projected implementation and completion dates. Describe whom this project will benefit and what impact the project will have on the participants or the school.

2. Cost breakdown. What is the total cost of the project? What portion are you requesting? Who will supplement the remainder if cost exceeds the grant – district, other grants, gifts, personal outlay? Other financial considerations. *If you have receipts include them with your summary.

3. How do you plan to report back to the state membership on your accomplishments? Will you write a short article for the state newsletter, "Violet's Voice"? Will you make a brief oral report at a state meeting? (The report time and method will be arranged through the scholarship chair, the state president, and the awardees.)

4. Awarded recipients may only apply once in a biennium.

5. A report will be sent to State President within one month of use of the funds including receipts if not handed in prior. Publication of the awardees' names and use of funds will be communicated to the state membership.

If you have any questions, please address them to the state scholarship chairman.

Alpha Delta Kappa Scholarship Chairmen –Sheila Spellacy, 110 Beverly Drive Meriden, CT 860-604-0501 sheilspell@aol.com

Revised: January 2019
Amended: September 2019

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Connecticut Alpha Delta Kappa
Application for Mini-Grant: Inter-Chapter Activity

This year, the state has set aside $100 to award two mini-grants to chapters. Host chapters are eligible for mini-grants of $25.00 to help support an inter-chapter activity. Checks will be issued in the name of the host chapter. A chapter may receive a mini-grant only once in a biennium. The money may be used for any aspect of the event: program, refreshments, transportation, favors… be creative.

There is no deadline for applications. However, mini-grants will be given on a first come, first serve basis. Should the event not take place, the money should be returned to the state treasurer in a check made payable to CT ADK.

We are excited to encourage inter-chapter programs and fraternal fellowship through this mini-grant program.

CT ADK Executive Board

Complete and return this form to the state treasurer.

Host Chapter _____

Guest Chapter _____

Date and description of program or event:

Name and address of host chapter treasurer:

_____

_____

_____

Signature of Host Chapter President _____

Date _____

Amended: September 2019

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TO HIGH SCHOOL COUNSELORS
AND QUALIFIED STUDENTS

SCHOLARSHIP FOR OUTSTANDING, ASPIRING TEACHERS

Dear Counselor,

Please provide access to this application to all students who meet the qualifications.

ALPHA DELTA KAPPA, an international honorary sorority for women educators, is seeking applicants interested in pursuing a career in education. Our state organization offers a one-time scholarship of one thousand dollars ($1500.00) to a qualified candidate.

ALPHA DELTA KAPPA was incorporated in 1947 for the purpose of giving recognition to outstanding women educators. Now an international organization with members in all fifty states, Canada, Mexico, Australia and Jamaica, we strive to uphold the highest standards of education and to engage in educational and charitable projects, as well as to sponsor scholarships.

ALPHA DELTA KAPPA invites qualified students to complete the attached application to be considered for this state scholarship. Applicants must be planning to pursue a career in education or a related field. On or before March 15th, the scholarship committee must receive the application. The scholarship committee of the local awarding chapter of Connecticut Alpha Delta Kappa will make the final selection by March 30th. If selected, the recipient and a guest will be invited to attend a state luncheon to receive the scholarship.

ALPHA DELTA KAPPA
CONNECTICUT SCHOLARSHIP

SCHOLARSHIP AMOUNT: $1500.00

Who May Apply?
1. Graduating female students entering college in the fall of the next school year.
2. Must be majoring in education or a related field.
3. Must be a Connecticut resident.

How to Apply:

___ Fill out an application form, available in the Guidance Office, and provide the following:

___ Official transcript of high school records

___ Letter of recommendation from high school principal, guidance counselor, or teacher

___ Essay on career plans, why you are entering the field of educational, and what you hope to bring to and get from your experience.

___ Include a statement describing why this scholarship is important to you. In that statement, add any information you feel may help the committee in evaluating your application.

___ Return the application and accompanying documents to the local scholarship chairman by March 15th.

Scholarship Chairman Name and Address:

Name _____

Mailing Address _____

_____

_____

N.B. Allow time for mail delivery. Mail placed in the mailbox on weekends, or too close to the deadline of March 15th, may not arrive in time to be considered.

LETTER OF RECOMMENDATION

Name of Applicant

Relationship to applicant and how long you have known her

Please provide information that would enable us to know the applicant better. We are interested in her academic proficiency, character, service to school and community, and evidence of future promise in the field of Education. Feel free to note any special circumstances of which the committee should be aware. Use this form, including reverse side if necessary, or attach your recommendation to the completed form.

Signature _____ Date_____

Name (please print) _____

Position_____

Address_____

_____

Please return to the applicant by March 10th. Thank you.

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ALPHA DELTA KAPPA – CONNECTICUT
SCHOLARSHIP APPLICATION

Date _____

Name in Full_____

Home Address_____

_____

Telephone_____ High School_____

Cell phone _____ E-mail _____

Father's Name in Full _____

Father's occupation_____

Mother's Name in Full_____

Mother's occupation _____

.

Please list all brothers and sisters with requested information.

Name	**Age**	**College**	**Class**

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Please list your extracurricular activities in order of their importance to you.

1._____

2. _____

3. _____

4. _____

What special recognition (prizes, etc.) have you received for excellence in any of these activities?

_____

What leadership positions have you held in your school organizations?

_____

In what organizations are your active outside of school?

_____

List in order of preference the fields of education you plan to pursue.

1._____

2._____

3._____

COLLEGE OR UNIVERSITY OF CHOICE

Please give the name and location of the college you plan to attend.

_____

_____

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REFERENCES
Please provide the names of two references (other than relatives and the person writing the recommendation for this scholarship) who have known you for at least two years and can speak to your character and commitment to your goals.

Name_____

Telephone Number _____

Email _____

Name_____

Telephone Number _____

Email _____

Return this application with official transcripts, essay, statement and letters of recommendation to the Scholarship Chairman named on the next page.

DEADLINE FOR APPLICATION: March 15, _____

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Final selection will be made on or before March 30, _____

Return all applications to the Scholarship Chairman of Alpha Delta Kappa's local chapter:

Chairman_____

Chapter_____

Address_____

_____

The winner and a parent/guardian are invited to attend the luncheon at the Alpha Delta Kappa state convention for the presentation of the scholarship. If you are named as the recipient, please ask about the date and time, and be prepared to give a one minute thank you to the members.

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To the Chapter Scholarship Committee

Please complete this form and send it to the state scholarship chairman upon naming a local recipient.

Please contact the recipient to invite her to attend the convention where her scholarship will be awarded.

Ask the candidate to prepare a brief paragraph of thanks to members.

You may wish to purchase a bouquet of flowers for the recipient.

The state will pay for lunch for the recipient and one guest.

Chapter Name_____

Scholarship Chairman_____

Phone _____

Name of Recipient_____

Phone _____

Please send to the state scholarship chairman

BY MARCH 30th

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CONNECTICUT STATE MEETING
Chapter Altruistic Fundraising Activities Application

Chapter Name: _____
President: _____
Phone Number: _____
Email: _____

Description of chapter fundraising activity:

_____
_____
_____
_____

Funds to be used for:

_____

Special consideration will be made to chapters that have activities for a specific time of year.

Check your preferred meeting(s):
September _____November _____ March _____

*Additional sales time may be requested through the President-Elect

Connecticut Alpha Delta Kappa
Annual Review of Financial Records

Procedure: The Financial Review Committee will meet to conduct a review of the CT AΔK books for the fiscal year just ended (June 1 - May 31). The Treasurer will provide financial records including bank statements, ledger, receipts, and requests for payment or reimbursement. The Budget Committee Chair will record information on the form and all members will sign it. The form will be filed with the other financial records for the fiscal year.

Financial Review Recommendations:

- Use a receipt book to verify every cash transaction. Receipts are number sequentially. If a receipt is voided, it should be saved as a record
- If available, use a bound ledger for records, not one with removable pages
- All reimbursements must be documented. Members requesting reimbursements should submit a Reimbursement Form and attach to it the receipt(s) for their expenditures
- Save all financial records for seven (7) previous fiscal years, including changes in membership count
- State events (when applicable) keep a master registration list with names, amounts paid, and totals. Add receipts from the restaurant or venue to the registration list. Submit list and receipts to the Treasurer along with any surplus funds and cash advances

The review procedure consists of:

Verifying account transactions and reconciliation

- track six (6) random deposits back to the submitter (Part 1-a)
- track six (6) random requests for payment to corresponding checks and bank statements (Part 1-b)
- verify balances on savings, checking, scholarship fund, and other investments (Part 1-c)

Verifying that deposits are made in a timely fashion (Part 2)

Verifying that only authorized signers make withdrawals from accounts (Part 3)

Verifying that periodic reports are reasonable and accurate (Part 4)

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Review

Fiscal Year _____ Date of Meeting _____

Location _____

Print names of committee members:

Treasurer _____

Committee Chair _____

Member _____

Member _____

Member _____

Part 1-a Deposits

Amount	Date	Bank Statement - Date	Ledger Yes/No	Account #	Receipt Yes/No

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Part 1-b Payments

Amount	Check #	Bank Statement - Date	Ledger Yes/No	Documentation (RFP, receipt) Yes/No	Account #

Part 1-c Balances

Date	Account Type	Balance
May 31	Checking	
May 31	Savings	
May 31	Scholarship	
May 31	AΔK Foundation Scholarship Fund	
May 31	Other:	

Part 2 Deposits

Made in a timely fashion? (Yes/No) _____

If “No”, explain: _____

Made by (names) _____

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Part 3 Withdrawals

Made by authorized signers only? (Yes/No) _____

If “No”, explain: _____

Made by (names) _____

Part 4 Periodic Reports

Date	Title of Report/Name of Meeting	Accuracy - Checkbook Balances w/ Bank Statement Yes/No (if “No”, explain)

Signatures of committee members:

Treasurer _____

Budget Committee Chair _____

Member _____

Member _____

Member _____

REQUE$T FOR FUNDS -AΔK

Requested by: _____Chapter:_____

Address: _____

_____

Amount: _____

Use:

_____

_____

Signature:_____Date:_____

Please send to:

Treasurer's Use Only Check Number _____Amount_____Account Debited_____

_____

PAYMENT OF FUND$ - AΔK

To: _____

From: AΔK Treasurer,

Date: _____

Attached, please find $_____for your requested payment for _____

_____

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Connecticut Alpha Delta Kappa

Explanation of Raffles, Scholarship Awarding Chapters,
Founders' Day and State Convention Assignments

Founders' Day or State Convention

This chapter reserves the site, determines dinner cost, creates the registration flier, collects money for dinners, make nametags, and follows guidelines for room preparations.

Connecticut Chapters

Alpha
Beta
Gamma
Epsilon
Zeta
Eta
Kappa
Mu
Pi
Psi
Alpha Alpha
Alpha Gamma

Scholarship Awarding Chapter

Awarding chapter should establish an ad hoc Committee to facilitate the selection process for State scholarship. The State Scholarship-chair will contact each awarding chapter with specifics regarding the selection process, attending state convention for presentation, introductions at Convention, and brief comments by student. Family may attend luncheon, the state pays for the recipient and one guest.

Raffle

At each Founders' Day celebration, chapters may hold raffles to offset cost for upcoming state functions. If any raffle money remains after the function, chapters should donate it to the altruistic cause of their choice. Raffles are not to be used as moneymaking events for chapter operations.

At State Convention, the awarding chapter for scholarship for the following year will do a raffle.

Amended November 2019
Amended March 2025

CONNECTICUT ALPHA DELTA KAPPA
Rotation Schedule of Chapter Responsibilities Revised 2019

Event Year	Founders' Day Registration	Convention Booklet Founders' Day Raffle	Convention/ Fun Day Registration	Awarding Scholarships	Spring Raffle Scholarships
2018 -2019	Pi	Eta	Upsilon	Zeta/Eta	Theta/Kappa
2019-2020	Psi	Alpha Alpha	Alpha Gamma	Theta/Kappa	Mu
2020-2021	Alpha	Beta	Gamma	Mu	Pi
2021-2022	Epsilon	Zeta	Eta	Pi	Psi
2022-2023	Theta	Kappa	Zeta	Psi	Alpha Alpha/ Alpha Gamma
2023-2024	Mu	Pi	Kappa	Alpha Alpha/ Alpha Gamma	Alpha/Beta
2024-2025	Alpha Alpha	Psi	Eta (Mu)	Alpha/Beta	Epsilon/ Gamma
2025-2026	Alpha Gamma	Alpha	Mu	Epsilon/ Gamma	Zeta /Eta
2026-2027	Beta	Epsilon	Psi	Zeta/Eta	Theta/Kappa
2027-2028	Gamma	Mu	Pi	Theta/Kappa	Mu
2028-2029	Zeta	Alpha Gamma	Alpha Alpha	Mu	Pi
2029-2030	Kappa	Gamma	Alpha	Pi	Psi
2030- 2031	Eta	Theta	Beta	Psi	Alpha Alpha / Alpha Gamma
2031-2032	Pi	Eta	Epsilon	Alpha Alpha / Alpha Gamma	Alpha / Beta