1. Candidates are judged on the basis of scholarship, leadership and interest in the field of education. Selection is made without regard to race, religion, color, gender, national origin or ancestry.

2. The winner of this scholarship must provide the address of the college to the Alpha Delta Kappa treasurer upon enrollment in the fall and provide proof   of enrollment in the fall. A check will then be issued to the school in the name of the recipient.

3. Only students planning to enter the field of education should apply.

4. Fill out the application and use the reverse side if additional space is needed. When doing so, include the appropriate item number.

5. Place the completed application in an envelope along with the following information:

     a. An official high school transcript
     b. Two letters of recommendation from your high school
          teachers or counselor
     c. Any clippings or other evidence showing your participation
          in school and in the community

6. To be eligible for consideration for the current year, all applications must be received by the Delta Omicron Scholarship Committee by:

<p style="text-align:center;color:red;">*Friday, March 25, 2022*</p>

Mail to:

        ADK-DO Scholarship Committee
        202 Oglethorpe Blvd.
        St. Augustine, Florida 32080

Date: _____

1. Full name _____

2. Home address _____

3. City _____ State _____ Zip Code _____

4. Home phone _____ Cell _____

5. Email address _____

6. College of accepted enrollment _____

7. Address of college/university (complete mailing address)

_____

8. List any other scholarships you have received:

_____

_____

_____

9. What are your special interests:

_____

_____

_____

_____

10. List the activities in which you have participated at <u>school</u> and any offices held:

_____

_____

_____

_____

10. List any <u>community</u> activities in which you have taken part and any offices held or leadership roles you have held:

_____

_____

_____

11. In what field of education do you intend to major and why?

_____

_____

_____

12. Why have you decided to go into the field of education and what do you think _you_ can offer to the students in the classroom?

_____

_____

_____

_____

_____

_____

I certify that the information on the application is correct.

Applicant's signature _____

Date _____