

The Delta Kappa Gamma Society International  
**The Pi State Educational Foundation**  
**Project Grant Application Form**

All applications must be submitted by November 1 or May 1.  
Please type or print all information. Feel free to use more space than provided.

Date \_\_\_\_\_

**Foundation Member submitting this application:**

Name \_\_\_\_\_

Member of Chapter \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_ Zip Code \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ FAX (\_\_\_\_) \_\_\_\_\_

E-mail \_\_\_\_\_

**1. Project Director:**

\_\_\_\_\_

**2. Title of Proposed Project:**

\_\_\_\_\_

**3. Origin of Idea for this Project:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**4. Description of the Project (include location):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**5. Is this a Chapter project or an individual project?**

\_\_\_\_\_

**6. If this is a Chapter project, state the percentage of Chapter members who will participate.**

\_\_\_\_\_

**How will members of your Chapter participate?**

---

---

---

---

---

**7. Has this project or any part of it been done previously by you or your Chapter? Explain.**

---

---

---

---

**8. Explain the need for this project:**

---

---

---

---

**9. State the approximate number of individuals who will benefit from this project**

---

**10. Specific goals and objectives of this project:**

---

---

---

---

---

---

---

**11. Timeline to accomplish goals:**

---

---

---

---

---

---

---

**12. Explain the Chapter need for financial help:**

---

---

---

---

---

**13. Itemized List of Expenditures (Note: Salaries and overhead costs will not be funded.) :**

---

---

---

---

---

---

---

**14. Are you receiving additional financial support? If yes, list the source and amount.**

---

---

---

---

---

**15. Total Amount Requested from the Foundation:**

---

**16. List ways in which you will identify and publicize Delta Kappa Gamma and your Chapter in your project:**

---

---

---

---

---

**17. List the specific methods to be used for evaluating your project:**

---

---

---

---

---

---

---

---

---

Preferred submission by email attachment to Sue Summerfield, [summy1@frontier.com](mailto:summy1@frontier.com), by due dates of November 1 or May 1. Or if no access, contact Sue directly, 518-922-6034 or send by postal mail to:

Submit documents to:  
**Pi State Educational Foundation**  
**Sue Summerfield**  
**346 Noeltner Road**  
**Amsterdam, NY 12010**