Postmark Deadline for Chapter Activity Entries – November 15

Sigma Kappa Delta awards $200 to the chapter activity that best promotes the aims of the society, locally or nationally. The activity should have occurred within eighteen months prior to the application date.

Fill in the following information to apply for this chapter award. Application must be signed by current chapter sponsor.

College Name: ________________________________________________________________

Address: _____________________________________________________________________
                                                     _____________________________________________________________________

Chapter Name (i.e. Theta Beta): ________________________________________________

Sponsor Name: __________________________________________________________________

Sponsor Phone: ___________________________ Email: ________________________________

Name of Chapter Activity: ______________________________________________________

Short Description of Activity:

____________________________________________________________________________
                                                                                   ____________________________________________________________________
                                                                                   ____________________________________________________________________
                                                                                   ____________________________________________________________________
                                                                                   ____________________________________________________________________
                                                                                   ____________________________________________________________________
Statement of Ways the Activity Furthers the Aims of SKD, Locally or Nationally:

________________________________________________________________________

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Clear Explanation of how to do this Activity:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

You are welcome to include copies of pictures, programs, or any visual aids that illustrate this activity.

Check One:

☐ I have no visual aids that illustrate this activity.

☐ This package includes visual aids that illustrate this activity.

☐ I will be sending visual aids that illustrate this activity via email to Sheila.Byrd@calhoun.edu.

Sponsor Signature: ________________________________________________________________

Date: __________________________________________________________________________

Mail Entries to:
SKD National Office
Attn: National Executive Director
Calhoun Community College
POB 2216
Decatur, AL 35609

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