



**DR. PHYLLIS RICHARDS ENDOWED LEADERSHIP APPLICATION
EPSILON KAPPA EDUCATIONAL FOUNDATION**

DKG Activity		Location	
Beginning Date		Ending Date	

First Name		Last Name	
Address			
Phone No.		Email	

Current Educational Position (Subject, Level, Title, Employer):

→ List anticipated costs of participation in this leadership activity, including registration, transportation, lodging, etc. Do not include any expenses that will be reimbursed from other sources.

<u>Expense category</u>	<u>Cost</u>

Grant Amount Requested	
-------------------------------	--

If my request is approved, I understand that 1) I may receive an award for the full amount or only a portion of the amount requested; 2) I must submit verification of participation within fourteen (14) days after completion of the activity; 3) the award will be paid in accordance with Epsilon Kappa Chapter procedures only upon submission of proper documentation. I also understand that the funds are not transferable.

Signature (typed)		Date	
--------------------------	--	-------------	--

→ Submit completed application by email to ekedfound@aol.com or mail to EPSILON KAPPA EDUCATIONAL FOUNDATION, 12314 W. Cow Path, Austin, TX 78727.

→ **Deadline for submission: April 15, 2019**