Eastern Region
CHAPTER OF THE YEAR AWARD
2016-2017
(Chapter Must Be in Compliance to Qualify)

The Chapter of the Year will be awarded to one Collegiate Chapter, and three (3) Alumnae Chapters:
• Small – up to 200 members
• Medium – between 201-500 members
• Large – 500+ members

Instructions: All submissions must be electronic and submitted as a .pdf file, which includes the completed application and supporting documentation that contains photos, link to video, copy of publicity received, etc.

File Naming Conventions: When submitting electronic document, please use the following format: StateCode_ChapterName_ChapterOfYearAward.pdf. When submitting supporting documentation, if not in a single file, would be named, StateCode_ChapterName_Support.pdf.

Check Appropriate Category:       ____ Collegiate      ____ Alumnae

Chapter Name: ____________________________________

College/University: __________________________ State: _______

Chapter President: ____________________________

E-Mail Address: ________________________________

Collegiate Primary Advisor: ______________________

# of Financial Members (as of 4/30/17): ________

RETURN BY EMAIL TO: regionalsecy@easternregiondst.org
APPLICATION DUE DATE: May 15, 2017
Number of Chapter Members that Attended:

Fall Regional Meeting: __________

DID/MIT Training: __________

Advisors Training: __________

Delta Days in the Nation's Capital: __________

Delta Day at the United Nations: __________

Number of DID Workshops Held by the Chapter: __________
(Per Recommendation of DID/MIT Training Task Force --- Min. 2 per year)

Topics:

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Alumnae Chapter Sponsorship for Collegiate Events: (Please provide the number of attendees supported for each activity.)

- Delta Day at the Nation’s Capital: # ______
- Delta Day at the United Nation’s: # ______
- State or Area-Wide Founders Day: #_______
- Fall Regional Meeting: # _______

Describe, in detail, Chapter Activity in the following National and Regional Programs & Initiatives implemented by the chapter: (Indicate collaborations with other chapters or organizations, impact on community, percent of chapter participation and publicity received, etc.). If no activity was conducted for a specific program/initiative indicate N/A. Submit with application any supporting documentation of community partnerships with other Delta chapters or other Greek organizations, government agencies or elected official that the chapter collaborated with or received funding for program(s) during the year. (Please use additional pages as necessary).

- Healthy Lifestyles
- My Cry In the Dark
- Dr. Betty Shabazz Delta Academy
- Dr. Jeanne L. Noble GEMS Institute
- Disaster Preparedness
- EMBODI
- Financial Fortitude
- Entrepreneurship
- Collegiate Transition Task Force (CTT) - (List chapters collaborated with and activities/events)
- Arts & Letters Events
- Sisterhood Month Activities
Reclamation Activities

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List and describe the programs that your chapter implemented under the Five Point Programmatic Thrusts. **Address the impact that each activity had on the community.** Include the number of chapter participants, number of attendees and any community partners. **(Use additional pages as necessary)**

- Educational Development
- Economic Development
- International Awareness and Involvement
- Physical and Mental Health
- Political Awareness and Involvement

Describe in detail, one program/project your Chapter implemented in 2015-2016 that made the greatest impact on the community. Include pictures and articles if available: **(Use additional pages as necessary)**
Describe why your chapter deserves the Chapter of the Year Award:  *(Use additional pages as necessary)*

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