



## 2020 CHAPTER OF THE YEAR AWARD APPLICATION FORM

**This application form and supporting documentation must be sent to [kbd@acbsp.org](mailto:kbd@acbsp.org) by March 31, 2020.** All materials shall become the property of Kappa Beta Delta International Honor Society. The decisions of the international selection committees will be final.

Name of Institution: \_\_\_\_\_

Kappa Beta Delta Chapter: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Year the Chapter Was Created: \_\_\_\_\_

### **Name and Address of the Chapter Advisor(s):**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Telephone: ( ) \_\_\_\_\_ FAX: ( ) \_\_\_\_\_ E-mail: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Telephone: ( ) \_\_\_\_\_ FAX: ( ) \_\_\_\_\_ E-mail: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

### **Name of the Administrative Authority Overseeing the Chapter:**

*(Accredited Business Unit's Dean or Director of Campus/Student Life Office)*

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Telephone: ( ) \_\_\_\_\_ FAX: ( ) \_\_\_\_\_ E-mail: \_\_\_\_\_



## CRITERION RESPONSES

For each criterion, please submit **up to 400 words** describing how you are exhibiting excellence in each of the five areas. Application materials that exceed the word limit or do not follow the format will be returned to the applicant for revision and resubmission. These are the criterion the evaluators will be basing their decisions on. The more specific and concrete the response, the more beneficial to the evaluators.

1. **Chapter Growth and Activity (300 Points):** Provide the evidence of chapter growth in membership and activity during the last two years. Describe some of the activities the chapter has been involved with.
  
2. **Leadership and Service (100 Points):** This criterion assesses the extent to which the chapter has improved the leadership skills of the student-members and their eagerness to engage in community service. How many service hours has the chapter as a whole produced during the last year? Please provide the number of service hours completed, awards and recognitions the chapter received during the last year. Describe each service activity completed and each award received.

### Chart for calculating the impact of community service activities

Activity	Number of hours completed per member	Number of members involved	<b>Total number of hours completed</b>	Number of direct beneficiaries	Number of indirect beneficiaries	<b>Total impact of the activity</b>
	(1)	(2)	<b>(1)x(2)</b>	(3)	(4)	<b>(3) + (4)</b>
<b>(Example: Meals-on-Wheels)</b>	2	10	<b>20</b>	20	3	<b>60</b>