





## MISSISSIPPI STATE ORGANIZATION

### Red Rose Award Report

#### Chapter Information

Chapter Name \_\_\_\_\_ District \_\_\_\_\_  
\_\_\_\_\_  
Contact person \_\_\_\_\_ Chapter President \_\_\_\_\_  
Phone \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Date of the Award \_\_\_\_\_ Place of the Award \_\_\_\_\_  
Ceremony (Enclose program copy, if any) \_\_\_\_\_

#### Recipient information

Name \_\_\_\_\_  
Position \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Phone \_\_\_\_\_

#### Accomplishments

Recipient has influenced or benefited education and the status of women in educational leadership roles with the following accomplishments \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

All items below must be included in the Red Rose packet to be considered for state





## RED ROSE AWARD Publicity Release

I, \_\_\_\_\_ (Name of Red Rose Recipient),

- Give
- Do not give

Permission for my photograph and personal/professional information to be submitted for publication in newspapers and/or Delta Kappa Gamma newsletters or other publications.

\_\_\_\_\_  
Signed

\_\_\_\_\_  
Date

### Submitted by

Chapter President or Red Rose Chair \_\_\_\_\_

Date \_\_\_\_\_

Please submit completed report within two weeks of presentation of the award.

**Deadline** for recognition is **February 1**

Send the Red Rose Award Report to

Professional Affairs Representative

