

Applicant's Name \_\_\_\_\_  
Last, \_\_\_\_\_ First

CALIFORNIA  
TEACHERS  
ASSOCIATION



## 2012 CTA Scholarship for Members

Office Use

### Directions:

- Type or print (clearly).
- Signature of local Chapter President or designee is required.
- CTA membership number or Social Security number is required.
- This scholarship is available to current "active" CTA members (including those with an emergency credential).

### MEMBERSHIP VERIFICATION

1. Applicant is certified to be:  Active Member of CTA.

2. Name of Scholarship Applicant \_\_\_\_\_  
First Last

3. Home Address \_\_\_\_\_  
Number & Street City State Zip

4. Mailing Address \_\_\_\_\_  
Number & Street City State Zip

5. CTA Membership Number or Social Security Number (**REQUIRED**):

\_\_\_\_\_

6. Local CTA Chapter \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_  
Name in Full Telephone

Address \_\_\_\_\_  
Number & Street City State Zip

CTA Chapter President or Designee \_\_\_\_\_  
Printed Name

Signature of Chapter President or Designee (**REQUIRED**)

\_\_\_\_\_

**(continued on back)**

Applicant's Name \_\_\_\_\_  
Last, \_\_\_\_\_ First

CALIFORNIA  
TEACHERS  
ASSOCIATION



## 2012 CTA Scholarship for Members

### Directions:

- Type or print (clearly).
- Applicant's signature is required.

### APPLICANT INFORMATION

NAME \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
First Middle Last Telephone

Male  Female

Colleges/Programs Attended

Dates of Attendance

Diploma/Degree/Certificate

<u>Colleges/Programs Attended</u>	<u>Dates of Attendance</u>	<u>Diploma/Degree/Certificate</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- Check box and incorporate into Applicant's Statement any special circumstances related to medical, physical or emotional difficulties that may have affected your grades. (See page 3 of 6)

(Official transcripts required. See "Application Instructions" – Page 3.)

1. I am a student presently attending \_\_\_\_\_  
Name of College/Program

Anticipated date of completion \_\_\_\_\_

2. I plan to attend \_\_\_\_\_  
Name of College/Program

3. I am presently employed at \_\_\_\_\_  
Name of School

***HEREBY AFFIRM** that I intend to be enrolled in an accredited school or appropriate training program as a full-time student or as a candidate for an approved credential or degree program. I understand that no funds shall be transmitted until CTA receives notification verifying my enrollment. I understand that enrollment must be completed within the current calendar year.*

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant



## 2012 CTA Scholarship for Members

### Directions:

- Please describe your future aspirations in the field of education or training and discuss how the scholarship will benefit you in this endeavor in a MAXIMUM of 250 words. Longer statements will not be read beyond 250 words.
- **ESP Applicants:** Please submit a statement describing your educational background and training goals.
- Incorporate an explanation of any unique circumstance related to medical, physical or emotional difficulties that may have affected your grades.
- Type on this page or attach a separate sheet.
- Statement **must** be **double-spaced**. Font size **must** be 12 pt. or larger. A standard font is required.
- Do not hand write.
- **Points will be deducted if the guidelines are not followed.**

### APPLICANT'S STATEMENT



## 2012 CTA Scholarship for Members

**Directions:**

- Please complete this page with information regarding your participation in school, school district and community activities.
- DO NOT submit additional pages. Select those activities you feel are important, attach a separate sheet as needed.
- Specify any offices held.
- Type or print (clearly).

### SCHOOL/COMMUNITY/PROFESSIONAL RECORD

**SCHOOL ACTIVITIES (Job Related)**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

**PROFESSIONAL ACTIVITIES**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

**COMMUNITY ACTIVITIES**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_



## 2012 CTA Scholarship for Members

### LETTER OF RECOMMENDATION #1 – District Employee – not a family member (Teacher, Counselor, Administrator, School Coach, College Professor)

**Directions:**

- Recommendation must be typed and attached to this form which must be filled out completely. Be sure to include **applicant's name, name of scholarship, your name, signature, and title** on the letter of recommendation.
- **Letters of recommendation must address each category SEPARATELY or they WILL BE considered incomplete.** Limit your statement to approximately 200 words for each category. Judges must be able to evaluate and score each category independently. Scholarships are awarded based on the highest cumulative scores. (Please note that letters of recommendation for college admission will not be considered).
- Please provide situations/examples that demonstrate achievement in each category. Add other items that may be of interest to the committee.
- Letter **must** be **double-spaced**. Font size **must** be 12 pt. or larger. A standard font is required. Do not hand write.
- **DEADLINE:** Postmarked by **February 3, 2012**. Return with application or send under separate cover to:

CTA Human Rights Department, c/o Janeya Dawson, P.O. Box 921, Burlingame, CA 94011-0921

- **Points will be deducted if the guidelines are not followed.**

### EACH CATEGORY MUST BE ADDRESSED SEPARATELY!

1. Involvement in and sensitivity to human, social and civic issues that reflect responsibility, reliability and integrity.

**(Limit response to approximately 200 words).**

Office Use  
Score

2. Educational and personal achievements that reflect career potential.

**(Limit response to approximately 200 words).**

Score

Signature \_\_\_\_\_ Title \_\_\_\_\_

Printed Name \_\_\_\_\_ School \_\_\_\_\_

No. of year(s) you have known applicant \_\_\_\_\_ Date \_\_\_\_\_



**LETTER OF RECOMMENDATION #2 - Community Member  
(Must Be From Someone Outside Of The Public/Private School Setting –  
No educators or immediate family members)**

**Directions:**

- Recommendation must be typed and attached to this form which must be filled out completely. Be sure to include **applicant's name, name of scholarship, your name, signature, and relationship to applicant.**
- **Letters of recommendation must address each category SEPARATELY or they WILL BE considered incomplete.** Limit your statement to approximately 200 words for each category. Judges must be able to evaluate and score each category independently. Scholarships are awarded based on the highest cumulative scores. (Please note that letters of recommendation for college admission will not be considered).
- Please provide situations/examples that demonstrate achievement in each category. Add other items that may be of interest to the committee.
- Letter **must** be **double-spaced**. Font size **must** be 12 pt. or larger. A standard font is required. Do not hand write.
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**EACH CATEGORY MUST BE ADDRESSED SEPARATELY!**

- |  |  |
|--|--|
| 1. Involvement in and sensitivity to human, social and civic issues that reflect responsibility, reliability and integrity.<br><b>(Limit response to approximately 200 words).</b> | Office Use<br>Score <input type="text"/> |
| 2. Educational and personal achievements that reflect career potential<br><b>(Limit response to approximately 200 words).</b>  | Score <input type="text"/>               |

Signature \_\_\_\_\_ Relationship to Applicant \_\_\_\_\_

Printed Name \_\_\_\_\_ Company/Organization \_\_\_\_\_

No. of year(s) you have known applicant \_\_\_\_\_ Date \_\_\_\_\_