Print Form

# California Teachers Association
# Martin Luther King, Jr. Memorial Scholarship Fund

## 2012 SCHOLARSHIP APPLICATION

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### CRITERIA for ELIGIBILITY

To be eligible for the 2012 CTA Martin Luther King Jr. Memorial Scholarship, the applicant must:

1. Be **one** of the following:

   ☐ An "Active" member of CTA.
   ☐ A dependent child of an "Active," retired, or deceased member (per IRS ruling)
   ☐ An "Active" member of Student CTA (SCTA).
   In order to receive the scholarship, the active SCTA member **must**:
   - Reside in California
   - Maintain membership at the time of disbursement

   **Current membership information is required on page three of this scholarship application.**

2. Be a member of one of the following defined ethnic minority groups:
   African American/Black, American Indian/Alaska Native, Asian/Pacific Islander, or Hispanic.

3. Be pursuing a college degree, credential, or certification for a **teaching-related career in public education** in an accredited institution of higher education. Scholarship funds must be used for education-related expenses only.

4. Application form must be typed and completed in its entirety. Applications are also available in the members only section of the CTA website (www.cta.org). You can complete and print the application in a PDF file or call the CTA Human Rights Department at (650) 552-5446.

5. Submit one (1) typed letter of recommendation from one (1) of the following:
   - A person familiar with the applicant's professional or student performance;
   - A person familiar with the applicant's aspirations, educational goals, and academic record;
   - A person who can address the four areas listed on the recommendation form.

**It is the applicant's responsibility to ensure that the application and all supporting documentation are submitted by the deadline.**

**Application Deadline:**

Must be postmarked on or before Friday, February 24, 2012.

▩ Incomplete, late postmark and/or faxed applications will not be considered.

**Mail completed application to:**

CTA Martin Luther King, Jr. Scholarship
CTA Human Rights Department
Post Office Box 921
Burlingame, CA 94011-0921
Attention: Janeya Dawson
(650) 552-5446

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### APPLICANT CHECKLIST

- ☐ 1. Be pursuing a college degree, credential, or certification for a ***teaching-related career in public education*** in an accredited institution of higher education.
- ☐ 2. Application form must be typed and completed in its entirety. Applications are also available in the members only section of the CTA website (www.cta.org). You can complete and print the application in a PDF file or call the CTA Human Rights Department at (650) 552-5446.
- ☐ 3. When questions do not apply, use "N/A" (not applicable).
- ☐ 3. Submit one (1) letter of recommendation. (Please refer to page 7 for instructions.) Maximum two pages.
- ☐ 4. Complete the personal statement. (must be typed).
- ☐ **6.** Sign and date the application on page 5**.**
- ☐ 7. Student CTA applicants only need to provide membership number on page 5 (under membership verification), which may be obtained by calling the Human Rights Department at (650) 552-5345.
- ☐ 8. Submit completed application to:

CTA Martin Luther King, Jr. Scholarship Committee
CTA Human Rights Department
Post Office Box 921
Burlingame, California 94011-0921
Attention: Janeya Dawson
(650) 552-5446

Approval and announcement of Scholarship recipients will be made by the CTA Board of Directors in April, 2012. **Funding is for the 2012-2013 academic school year.**

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**TYPE ALL PARTS OF THE APPLICATION (Except signature and date)**

NAME: _____
Last First Middle

Applicant is certified to be: (***Check all that apply***)

- ☐ Active CTA Member
- ☐ A dependent child of an "Active," retired, or deceased member
  Name of Parent:_____
- ☐ Active Student CTA Member

Of which ethnic minority group are you a member?

☐ African American/Black ☐ American Indian/Alaska Native ☐ Asian/Pacific Islander ☐ Hispanic

Male: _____ Female: _____ Age: _____ Phone Number: ( ) _____

Email Address: _____

Local Address: _____
Number/Street

_____
City State Zip Code

Permanent Address: _____
Number/Street

_____
City State Zip Code

Have you applied or been accepted into an accredited institution of higher education?

☐ Intend to Apply ☐ Applied ☐ Been Accepted

Proposed study for: Associate Degree ____ Bachelors ____ Credential ____ Masters ____ Doctorate ____

Specify type of certification credential and/or major/minor_____

Present school of attendance: _____

Intended school of attendance:_____

Expected date of entering program: _____ Expected date of completing program:_____

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| NAMES OF COLLEGES ATTENDED | DATES OF ATTENDANCE | DEGREE |
|---|---|---|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

**ESTIMATED INCOME FOR 2011:** When questions do not apply, use N/A (Not Applicable)

Applicant income: $ _____ Other Household Income: $ _____

Number of dependents (Under age 23): _____ Ages: _____

Parental/guardian income only: $_____

**FINANCIAL RESOURCES:** (estimated, year of study)

Prospective earnings for academic year $_____

Financial aid from parents $_____

Other income or loans (itemize) $_____

G.I. Bill Benefits $_____

Soc. Sec. Benefits $_____

_____ $_____

_____ $_____

Other scholarships and grants $_____

**TOTAL ESTIMATED RESOURCES (Yearly) $_____**

**EDUCATIONAL EXPENSES:** (estimated, year of study)

Fees (including tuition if appropriate) $_____

Books & Educational Supplies $_____

Living Expenses $_____

Travel Expenses $_____

Incidentals (itemize) $_____

_____ $_____

_____ $_____

**TOTAL ESTIMATED EXPENSES (Yearly) $_____**

**EXPLAIN** any special circumstances which make it imperative that you receive financial aid in order to further your studies in education. If more space is needed, please attach an additional sheet.

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**ACTIVITIES/ACHIEVEMENTS:** Extra curricular, voluntary, community based, honors and awards, etc. (No attachments)

| | Location | Activities / Awards | Dates |
|---|---|---|---|
| High School | | | |
| College | | | |
| Community and/ or Professional | | | |

**EMPLOYMENT RECORD: (Starting with most recent):**

Dates (From-Present) Employer or District Location Position

_____

_____

_____

_____

**CURRENT POSITION:** ☐ Teacher ☐ Student ☐ Other, please specify _____

**I HEREBY AFFIRM that I am currently enrolled or intend to enter a program in an accredited institution of higher education to pursue a degree or credential for a teaching-related career in public education. I understand that any deviation from my proposed program of study may be cause for review by the Scholarship Committee. I acknowledge that scholarship funds must be used for education-related expenses only.**

**Date** _____ **Signature:** _____

**MEMBERSHIP VERIFICATION:** CTA Membership Number:_____

Full Name of Chapter: _____/City_____

Chapter President's Signature: _____

**(No chapter president signature required for SCTA members)**

Student CTA Membership Number: _____

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## APPLICANT'S PERSONAL STATEMENT

(Please use this form only. Must be typed, double-spaced with 12 point font)

**ON THIS SHEET**, in 200 words or less, please explain: (a) how this scholarship will support your professional/career goals; (b) how you plan to complete the program of study you are undertaking; and (c) your personal attributes and unique qualities that will help you succeed in the profession.

Name of applicant_____
Last First

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## Guidelines for Letter of Recommendation

The applicant is required to submit one (1) letter of recommendation from a person familiar with his/her professional or student performance, aspirations, educational goals and academic record.

The letter of recommendation should not be more than two (2) pages (double-space using a 12 point font).

Cite specific examples that may be of interest to the Scholarship Committee. The letter of recommendation must include:

- Involvement in and sensitivity to human, social and civic issues
- Characteristics such as responsibility, reliability, and integrity
- Academic and vocational potential
- Special and personal achievements
- Position/Relationship to applicant
- Number of years he/she has known applicant
- School/Organization of individual providing letter of recommendation
- Signature of individual providing letter of recommendation

**NOTE: Submit this letter of recommendation form with the application or mail directly to**:

CTA Human Rights Department
P.O. Box 921
Burlingame, CA 94011-0921
Attention: Janeya Dawson

**Deadline: Postmarked on or before Friday, February 24, 2012.**