

\$500 Teacher-Member Scholarship

Deadline: February 15, 2011 [Postmark date. "Faxed" or "E-mailed" copies are not acceptable.]

Mail Scholarship application to: Kentucky PTA, P. O. Box, 654, Frankfort, KY 40602-0654

Please Copy This Form And Distribute to Your Teachers.

Applicant Must Be a Member of a PTA/PTSA "In Good Standing".

Teacher scholarships are granted to Kentucky certified teachers for the purpose of obtaining credit toward a master's degree or Rank 1. Financial need, number of dependents, personal remarks and letters of recommendation will be considered by the selection committee. The teacher must be an member of the PTA/PTSA.

- 2) letters of recommendation from your PTA/PTSA president and the superintendent or principal of the school where you teach (or both);
- 3) a brief personal history and additional comments (limit two pages, type, double spaced and no smaller than 10 point.

Incomplete applications will be disqualified. All decisions of the selection committee are final.

Checks will be issued in the name of both the recipient and the college. **NOTE:** IRS regulations prohibit the issuing of a scholarship check without the recipient's social security number.

Include:

- 1) a copy of your college credits or copies of your grades from the personnel files of the school system where you are presently employed;

Recipient must use scholarship within one year of receipt of award. It cannot be used retroactively. Checks are issued in the names of the scholarship recipient and the college/university and can only be applied toward course work fees that have not been previously paid.

Name _____ Date of Birth _____ Sex _____

Address _____
Street/P. O. Box City State Zip

Telephone (____) _____ E-mail _____

Soc. Sec. # _____

Name of College/University you plan to attend _____

Address _____
Street/P. O. Box City State Zip

When do you plan to attend? _____ Fall Semester _____ Spring Semester
_____ Full Summer Term _____ 1st Semester Summer _____ 2nd Semester Summer

Reason for need of scholarship _____

Name of Spouse _____ Occupation of Spouse _____

Address _____
Street/P. O. Box City State Zip

Annual family income _____ Under 25,000 _____ 25,000 - 35,000 _____ 35,000 - 45,000 _____ over 45,000

Children _____ Yes _____ No Number of Children _____ Ages _____

All PTAs/PTSAs to be a unit in good standing MUST:

- Send at least one national and state dues payment (\$2.75 per member) to the Kentucky PTA office no later than October 15th;
- Send district dues to district treasurer or Kentucky PTA office as required;
- Send the PTA financial review form to the Kentucky PTA office by Aug. 15th;
- File 990 IRS Tax Form by Nov. 15 and mail a copy to Kentucky PTA and Kentucky Attorney General;
- Send bylaws for approval by the Kentucky PTA every 5 years.

Credit hours needed to complete degree _____

Present Teaching Field _____

Anticipated Teaching Field _____

School where you now teach _____

School District _____ County _____

Member of _____ PTA/PTSA

Signature of PTA/PTSA President _____

