CONTINUING EDUCATION SCHOLARSHIP
FOR SCHOOL STAFF MEMBERS

Continuing Education Scholarships for School Staff Members for up to $500.00 each are available from California State PTA to elementary and secondary teachers, counselors, school nurses and other staff members employed in California public schools.

AVAILABILITY
California State PTA scholarship funds are available for continuing education course(s). The course(s) must be at an accredited college or university, schools of nursing, hospitals, organized nursing groups or private providers meeting BRN requirements from January 1 through December 31. Courses must be completed by December 31 of the year following the awarding of the scholarship.

QUALIFICATIONS
Scholarships are awarded to credentialed teachers, counselors, school nurses and other staff members
1. who were employed full time in the public schools in California during the preceding academic year;
2. who have a minimum of three (3) years’ experience in California public schools;
3. who have a full-time contract for the current year;
4. who plan to continue as a teacher, counselor, school nurse or staff member; and
5. who are members of a PTA/PTSA unit in good standing, and teach or have a counseling, nursing or staff position at that PTA/PTSA school.

APPLICATION AND DUE DATE
The application is available online. If an applicant is unable to submit an application online, please reach out to the California State PTA office at 916.440.1985 or at scholarships@capta.org.

The final application packet must include:
1. a completed online application form;
2. a legible copy of applicant's current PTA/PTSA membership card uploaded to online application form
3. an essay describing
   a. your current teaching/counseling/nursing or staff assignment;
   b. other teaching/counseling/nursing or staff assignments and dates of service;
   c. how the course(s) will improve your effectiveness in your role;
   d. any PTA/other volunteer work in which you are involved;
4. reference forms and letters, uploaded to online application form
   a. reference form and letter written specifically for this scholarship application;
   b. first reference form and letter completed by applicant's current administrator, or representative; and
   c. second reference form and letter completed by current PTA president, or representative.
   d. Note: Each completed reference form and letter should be given to the applicant directly.

Submission instructions:
• The application must be received by 11:59:59 p.m. on October 15.
• Late applications will not be accepted.

SELECTION
Recipients are selected by members of the California State PTA Scholarship and Grant Committee. All applicants will be notified of their standing by letter in December. A check for the scholarship is sent directly to each recipient.

8/2022
REFERENCE FORM
CONTINUING EDUCATION SCHOLARSHIP

DATE DUE TO CALIFORNIA STATE PTA OFFICE BY APPLICANT – OCTOBER 15

CHECK APPLICABLE SCHOLARSHIP:

☐ TEACHERS/COUNSELORS/SCHOOL NURSES/OTHER STAFF — On a separate sheet, give an evaluation of the abilities and characteristics of the applicant, as well as comments regarding applicant's personal and professional qualifications. Include any of the applicant's PTA/school/student extracurricular activities of which you are aware. Information provided will be considered confidential. Please limit letter to one page.

☐ PTA VOLUNTEERS — On a separate sheet, give an evaluation of the abilities and characteristics of the applicant, as well as comments regarding applicant's personal and professional qualifications. Unit/council/district PTA president – describe applicant's PTA volunteer involvement. Information provided will be considered confidential. Please limit letter to one page.

RETURN THIS FORM WITH LETTER OF RECOMMENDATION DIRECTLY TO APPLICANT

APPLICANT’S NAME ____________________________________________________________

Form completed by __________________________________________________________

Title/Position ________________________________________________________________

Mailing Address _____________________________________________________________

___________________________________________________________________________

Telephone (___) __________________ Email ________________________________

SIGNATURE __________________________________________ Date __________________