GRADUATING HIGH SCHOOL SENIOR SCHOLARSHIP

California State PTA offers Graduating High School Senior Scholarships in the amount of $500.00 each to acknowledge the achievements of high school seniors for volunteer service in the school and community.

AVAILABILITY
Applicant must have volunteered in the school and community and must be graduating from a California public high school between January 1 and June 30 of the current academic year. Applicant must be a member of the PTA/PTSA in good standing at his/her high school, or if the high school does not have a PTA/PTSA, the applicant must be a member of a PTA/PTSA in good standing and a council, district or state PTA board member.

QUALIFICATIONS
This scholarship recognizes volunteer service in the school and community and does not have a grade point average restriction or requirement.

Applicant must be
1. a California resident;
2. graduating from a high school in California;
3. a member of his/her high school PTA/PTSA in good standing, or if the high school does not have a PTA/PTSA, a member of a PTA/PTSA in good standing and a council, district or state PTA board member;
   a. a copy of applicant’s current PTA/PTSA membership card must be submitted with application.

APPLICATION AND DUE DATE
The application and accompanying reference forms may be obtained from:
• the California State PTA office;
• the California State PTA Toolkit;
• the website at capta.org.

The final application packet must include:
1. a completed application form;
2. a legible copy of applicant’s current PTA/PTSA membership card on an 8½” x 11” sheet of paper;
3. an essay describing
   a. any PTA/PTSA responsibility you may have;
   b. your career plans, goals, objective and any other information you feel would be valuable to the selection committee;
   c. all school service-related activities;
      i. including any service you provide to others in your school;
      ii. without using abbreviations for any organizations listed;
   d. your volunteer service in the community; (Do not include school activities listed in 3c, above.)
4. reference forms and letters;
   a. reference form and letter written specifically for this scholarship application;
   b. first reference form and letter completed by a community volunteer leader with whom student applicant has served (may not be related to student);
   c. second reference form and letter completed by a member of the high school faculty; and
   d. copies of recommendation letters for college admission are NOT acceptable.
   e. **Note:** Each completed reference form and letter should be given to the applicant directly.

Submission instructions:
1. Original application, and reference forms with letters must be mailed together in ONE envelope.
   a. Faxed submissions will not be accepted.
2. The application must be received in the California State PTA office by close of business February 1, if mailed, or by
   a. Postmarks will not be accepted. Application will not be considered if received after due date or if any of the required materials are missing.
   b. When February 1 falls on a weekend, applications are due in the State PTA office by close of business the following Monday.

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 by the end of March. A check for the scholarship will be sent directly to the recipient.

FOLLOW-UP
Scholarship recipients must provide proof of enrollment and completion of coursework to the California State PTA office by June 1.

*Accreditation acceptable from the Western Association of Schools and Colleges, Inc.; Middle States Association of Colleges and Schools; New England Association of Schools and Colleges; North Central Association of Colleges and Schools; Northwest Association of Schools and Colleges; and the Southern Association of Colleges and Schools.
APPLICATION
GRADUATING HIGH SCHOOL SENIOR SCHOLARSHIP

DUE DATE IN THE CALIFORNIA STATE PTA OFFICE – FEBRUARY 1
APPLICATION WILL NOT BE CONSIDERED IF RECEIVED AFTER DUE DATE

Please type or print legibly.

PTA Unit ID Number ____________
As listed on your PTA membership card; if you do not have a PTA membership card, contact your PTA president.

Last Name ____________________ First Name ____________________ Middle Name ____________________

Mailing Address ____________________ City/State ____________________ Zip Code ____________________

Telephone ____________________ Email ____________________

Complete Name of High School ____________________ Telephone ____________________

High School Mailing Address ____________________ City, State ____________________ Zip Code ____________________

Date of Graduation (Month, Day, Year) ____________________ Intended major/course of study at college/university, trade or technical school ____________________

☐ I certify that this scholarship will be used for my education.

SIGNATURE of applicant (required) ____________________ Date ____________________

List names of accredited colleges/universities, community colleges or trade or technical schools to which you have applied and/or been accepted. Recipient must attend an accredited college/university, community college or trade or technical school within the first year following high school graduation.

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

Do you give permission for your name to be used in a news release concerning these scholarships?
☐ Yes ☐ No

PROVIDE THE FOLLOWING:
1. Describe any PTA/PTSA responsibility you may have.
2. Describe your career plans, goals, objective and any other information you feel would be valuable to the selection committee.
3. Describe all school service-related activities – include any service you provide to others in your school. Do not use abbreviations for any organizations listed.
4. Describe in detail your volunteer service in the community. Do not include school activities listed in 3 above.

RETURN APPLICATION PACKET IN THE FOLLOWING ORDER:
• Completed application form
• Legible copy of your current membership card on 8½” x 11” sheet of paper
• Essay response to items 1-4, above [no more than 500 words total (approximately 2 pages double-spaced)]
• Two (2) reference forms with letters
  ☐ From unrelated community volunteer
  ☐ From unrelated high school faculty member

DO NOT STAPLE

RETURN TO: scholarships@capta.org OR California State PTA, 2327 L Street, Sacramento, CA 95816-5014
FACSIMILES WILL NOT BE ACCEPTED
REFERENCE FORM

GRADUATING HIGH SCHOOL SENIOR SCHOLARSHIP
TO BE COMPLETED BY SCHOOL FACULTY/COMMUNITY MEMBER

DUE DATE TO CALIFORNIA STATE PTA OFFICE BY APPLICANT – FEBRUARY 1

The purpose of this scholarship is to acknowledge the achievements of high school seniors for volunteer service in the school and community and to provide an incentive for students to continue their education.

Name of Student ________________________________

This student has applied to California State PTA for a scholarship. Please include this reference form and a separate letter of recommendation, which MUST be written specifically for this graduating high school senior scholarship application. Copies of recommendation letters for college are not acceptable. Attach the letter of recommendation, written on an additional sheet. Information provided will be considered confidential. Please limit letter to one page.

In what capacity do you know student ____________________________________________

____________________________________________________________________________

Provide a description of each activity and the student’s involvement. Give your evaluation of the abilities, attitudes and potential of the student and comments regarding student’s volunteer service, activities, achievements and personal qualifications.

Name of Faculty/Community member completing form ________________________________

Faculty/Community position ________________________________________________________

Mailing Address ________________________________________________________________

____________________________________________________________________________

Telephone ( ) ___________________ Email ____________________________________________

SIGNATURE ___________________________ Date ________________________________

RETURN THIS FORM WITH LETTER OF RECOMMENDATION DIRECTLY TO APPLICANT.