

CONTINUING EDUCATION SCHOLARSHIP FOR CREDENTIALLED CLASSROOM TEACHERS AND COUNSELORS

Continuing Education Scholarships for Credentialed Teachers and Counselors for up to \$500.00 each are available from the California State PTA to elementary and secondary teachers and counselors 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 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 and counselors

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' teaching/counseling experience in California public schools;
3. who have a full-time teaching or counseling contract for the current year;
4. who plan to continue as a teacher or counselor; and
5. who are members of a PTA/PTSA unit in good standing, and teach or have a counseling position at that PTA/PTSA school.

APPLICATION AND DUE DATE

The application and accompanying reference forms may be obtained from:

- the website at www.capta.org;
- the *California State PTA Toolkit*; and
- the California State PTA office.

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. your current teaching/counseling assignment;
 - b. other teaching/counseling assignments and dates of service;
 - c. how the course(s) will improve your effectiveness as a teacher/counselor;
 - d. any PTA/school/student extracurricular activities in which you are involved;
4. reference forms and letters in sealed envelopes;
 - 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 in a sealed envelope.

Mailing 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 October 15.**
 - 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 October 15 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 in January. A check for the scholarship is sent directly to each recipient.

FOLLOW-UP

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

APPLICATION

CONTINUING EDUCATION SCHOLARSHIP FOR CREDENTIALLED CLASSROOM TEACHERS AND COUNSELORS

DUE DATE IN THE CALIFORNIA STATE PTA OFFICE — OCTOBER 15

APPLICATION WILL NOT BE CONSIDERED IF RECEIVED AFTER DUE DATE

Please type or print *legibly*.

Last Name	First Name	Middle Name
Street Address	City/State	Zip Code
() Telephone	Email	

Total number of years:

as a credentialed teacher/counselor _____ credentialed teacher/counselor in California _____

Complete Name of School	Telephone
Street Address of School	City/State
	Zip Code

SIGNATURE of applicant (required) _____ Date _____

<p>List all credentials held:</p> <p>List course(s) selected for continuing education. If course schedule is not available, please indicate subject area/field of interest.</p> <p>Name accredited college or university you plan to attend.</p>

Provide the Following:

1. Describe your current teaching/counseling assignment.
2. List other teaching/counseling assignments and dates of service.
3. Describe how the course(s) will improve your effectiveness as a teacher/counselor.
4. Describe your involvement in PTA/school/student extracurricular activities.

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 two (2) pages total]
- Two (2) reference forms with letters, in sealed envelopes.

Paper clip the documents together – DO NOT STAPLE

RETURN TO: California State PTA, 2327 L Street, Sacramento, CA 95816-5014
FACSIMILES WILL NOT BE ACCEPTED

OFFICE USE ONLY	<input type="checkbox"/> Copy of current membership card	<input type="checkbox"/> Two (2) reference forms with letters
	<input type="checkbox"/> Unit ID Number _____	<input type="checkbox"/> Unit in good standing

REFERENCE FORM CONTINUING EDUCATION SCHOLARSHIP

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

CHECK APPLICABLE SCHOLARSHIP:

- SCHOOL NURSES** — 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 or other volunteer work of which you are aware. Information provided will be considered confidential. **Please limit letter to one page.**

- TEACHERS & COUNSELORS** — 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 IN A SEALED ENVELOPE
DIRECTLY TO APPLICANT**

APPLICANT'S NAME _____

Form completed by _____

Title/Position _____

Mailing Address _____

Telephone (____) _____ Email _____

SIGNATURE _____ Date _____