

Continuing Education Scholarship Application

Carroll County Retired School Personnel Association

Please Print Neatly in Blue or Black Ink

Name _____

Address _____

Phone Number Home: _____ Cell: _____

Teaching Experiences- Identify educational employment with minimum of two years completed.

Current Assignment: Name of School(s)	Grade(s)	Subjects Taught	Dates Employed
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_____	_____	_____	_____
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Previous Assignment(s):

_____	_____	_____	_____
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_____	_____	_____	_____
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Previous Education

Undergraduate School (Submit a copy of your undergraduate transcript if applicable)

Name: _____

Address: _____

Major: _____ Degree: _____ Graduation Year _____

GPA: _____ Number of Credits _____

Post Graduate

Graduate Classes Already Completed (if applicable). Submit transcript.

School	Course(s)	Credits
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_____	_____	_____
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_____	_____	_____
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(Add additional sheet if needed)

Post Graduate Courses Planned and Career Goal

College _____ Course(s) _____ Credits _____

Certification for _____ (position)

Recertification for _____ (position)

Personal and Civic Organizations to which you belong(ed) including dates and posts held:

Scholarships Received, Awards, Grants, Honors or Other Special Recognition:

Recommendations:

1. Submit a letter of recommendation from a school administrator or supervisor in a sealed envelope.
2. List one other professional reference who can provide additional information about you:

Name: _____ Phone number _____

E-mail address: _____

Personal Statement:

Attach a separate sheet to this application an explanation of what you feel you should teach your students aside from your subject matter content. Explain in 200-250 words typed and double-spaced.

Direct questions to: ccrspascholar@gmail.com

Application Submission

Must be received by April 1st

Submit this application and all accompanying materials to:

Carroll County Retired School Personnel Association

Post Office Box 1864

Westminster, MD 21157