

Champaign County Retired Teachers Association

SCHOLARSHIP APPLICATION

Must be received or postmarked by Tuesday, March 30, 2021

Send to: CCRTA Scholarship Committee, c/o Susan Millice, 5750 Black Rd., Cable, Ohio 43009

The three pages of this application form must be completed in full for it to be considered. Incomplete forms will be disqualified.

Name _____

Address _____

City, State, Zip Code _____

Phone _____ E-mail address _____

Current high school _____

Date of graduation _____

College/colleges you have applied to include: _____

College/colleges you have been accepted by: _____

Major field of study planned: _____

Parent(s)/Guardian(s): _____

Number of siblings: _____

Signed: (applicant) _____

Signed: (parent) _____

***(to be completed by counselor)**

*GPA on a 4.0 scale _____

*Class rank _____ out of _____

*ACT score _____ and/or SAT score _____

Signed: (school official) _____

Attach the following items to your application:

1. An essay (approx. 300 words) stating why you wish to go into the teaching profession and why you feel you should be the recipient of this scholarship.
2. Three signed letters of recommendation from non-family members.
3. A copy of your most recent transcript.

List any work experience/volunteer services performed during the last four years.

Describe any major financial concerns or difficulties that could impact your attending college.