



2010 Scholarship for Dependent Children

Eligibility

1. Applicant must be claimed as dependent status* on the current year's IRS forms. Applicant must be the dependent child of an active,** or retired California Teachers Association member. Applicants are also eligible if they are claimed as dependents and are the child of a deceased CTA member. This scholarship is not available to spouses of CTA members. ***Per IRS regulations. **Pursuant to CTA Bylaws**
2. Submit a complete application postmarked by the deadline – **February 5, 2010**. A complete application consists of pages 1-6 plus official transcripts.
3. High school grade point average should reflect at least a 3.5 unweighted average. College coursework should reflect high academic achievement. Explain any unique circumstance related to medical, physical or emotional difficulties that may have affected your grades.

Evaluation of Applications

1. Scholarships are awarded based on:

■ Applicant's Statement	30 pts	} 50%
■ School and Community Activities	20 pts	
■ Letter of Recommendation #1	25 pts	} 50%
■ Letter of Recommendation #2	<u>25 pts</u>	
	100 pts	

- Points will be deducted if the guidelines are not followed.

2. Letters of recommendation must separately address each of the following categories:
 - Involvement in and sensitivity to human, social and civic issues that reflect responsibility, reliability and integrity.
 - Educational and personal achievements that reflect academic and vocational potential.
3. Applications are read in their entirety by a team of 4 judges. The applications with the highest cumulative scores are chosen as scholarship recipients.

Scholarship Awards

1. CTA receives between 400 – 600 applications in this category annually. Up to thirty-five (35) \$5,000 scholarships are awarded.
 - The Ralph J. Flynn Memorial Fund provides the scholarship for the highest scoring applicant.

2. Scholarship applicants are notified by mail in May. In order to receive funds, scholarship recipients will be required to submit proof of registration for the summer or fall 2010 semester/quarter as:
 - A full-time student in an accredited institution of higher learning; or
 - Registered in an approved credential or degree program in an accredited institution of higher learning.

Deadline for submitting applications: February 5, 2010

A Complete Application Includes:

- Membership Verification** (page 1). Must be signed by Chapter President or designee.
- Applicant Information** (page 2). Applicant must sign.
- Applicant's Statement** (page 3).
- School/Community Activity Record** (page 4).
- Letter of Recommendation #1** – Educator (page 5). (Teacher, Counselor, Administrator, School Coach, College Professor)
- Letter of Recommendation #2** – Community Member (page 6). A community member is someone who knows the applicant outside of the school setting. **(No educators or immediate family)**
- OFFICIAL Transcripts** – Send **ONLY** official high school and/or college transcripts bearing the school seal. Transcripts from the most recent years of coursework will be used to compute the applicant's GPA. Include high school transcripts if college units total less than 60 semester or 90 quarter units.

Directions:

- Please follow directions on each page. Applications that do not follow directions are considered incomplete.
- Applications that do not have the signature of the Chapter President or designee (page 1) are considered incomplete.
- Applications that are not signed by the applicant (page 2) affirming that he or she intends to enter an accredited school of higher learning are considered incomplete.
- **Letters of recommendation must address each category SEPARATELY or they WILL BE considered incomplete.** Judges must be able to evaluate and score each category independently.
- **Choose carefully the two (2) people that will be writing the letters of recommendation.** Select those that know you best and can address each category. Judges are looking for situations/examples that demonstrate achievement in each of the categories. Letters of recommendation for college admission will not be considered.
- Transcripts and letters of recommendation may be sent under separate cover. However, it is best to include the application in its entirety in one envelope. Some applications are left incomplete because a letter of recommendation or transcript never arrives in our office.

Forms must be postmarked no later than: February 5, 2010
Incomplete and Late Applications will NOT be Considered

RETURN ALL FORMS TO:

CTA Scholarship Committee
Human Rights Department, c/o Janeya Collins
Post Office Box 921
Burlingame, CA 94011-0921

Applicant's Name _____
Last, _____ First

CALIFORNIA
TEACHERS
ASSOCIATION



2010 Scholarship for Dependent Children

Office Use

Directions:

- Type or print (clearly).
- Signature of local Chapter President or designee is required.
- CTA membership number or Social Security number is required.

MEMBERSHIP VERIFICATION

1. Applicant is certified to be: Dependent Child of an Active Member
 Dependent Child of a Retired Member--Year _____
 Dependent Child of a Deceased Member--Year _____
2. Name of Scholarship Applicant _____
First _____ Last _____
3. Home Address _____
Number & Street _____ City _____ State _____ Zip _____
4. Mailing Address _____
Number & Street _____ City _____ State _____ Zip _____
5. CTA Membership Number or Social Security number (**REQUIRED**):

(If member is retired or deceased, indicate last known membership number and chapter name)
Name of CTA Member _____ (_____) _____
Telephone _____
Address _____
Number & Street _____ City _____ State _____ Zip _____
Relationship to Applicant _____
6. Local CTA Chapter _____ (_____) _____
Name in Full _____ Telephone _____
Address _____
Number & Street _____ City _____ State _____ Zip _____
Chapter President _____
Printed Name _____

Signature of Chapter President or designee (**REQUIRED**)

Applicant's Name _____
Last, _____ First

CALIFORNIA
TEACHERS
ASSOCIATION



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Directions:

- Type or print (clearly).
- Applicant's signature is required.

APPLICANT INFORMATION

NAME _____ (_____) _____
First Middle Last Telephone

- Dependent Child Male Female

High School/Colleges Attended

Dates of Attendance

Diploma/Degree

<u>High School/Colleges Attended</u>	<u>Dates of Attendance</u>	<u>Diploma/Degree</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

1. I am a high school student presently attending _____

I plan to attend (name of college) _____

Computed Unweighted G.P.A. _____ Computed Weighted G.P.A. _____

- Check box and incorporate into Applicant's Statement any special circumstances related to medical, physical or emotional difficulties that may have affected your grades.
(See page 3 of 6)

Official transcripts required. See "Application Instructions" – Page 3.

2. I am a college student presently attending _____

Number of college units completed _____ Computed G.P.A. _____

Anticipated date of completion of degree/credential _____

I HEREBY AFFIRM that I intend to be enrolled in an accredited school of higher education as a full-time student or as a candidate for an approved credential or degree program. I understand that no funds shall be transmitted until CTA receives notification from the registrar of the college or university verifying my enrollment. I understand that enrollment must be completed within the current calendar year.

_____ Date

_____ Signature of Applicant

Applicant's Name _____
Last, First

CALIFORNIA
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Directions:

- Please describe your personal vision, unique qualities and future goals in a MAXIMUM of 250 words. Longer statements will not be read beyond 250 words.
- Incorporate an explanation of any unique circumstance related to medical, physical or emotional difficulties that may have affected your grades.
- Type on this page or attach a separate sheet.
- Statement **must** be **double-spaced**. Font size **must** be 12 pt. or larger. A standard font is required.
- Do not hand write.
- **Points will be deducted if the guidelines are not followed.**

APPLICANT'S STATEMENT



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Directions:

- Please complete this page with information regarding your participation in school and community activities.
- College students should include their high school records.
- Select those activities you feel are important, attach a separate sheet as needed.
- Place an "X" in grade column for year of participation OR indicate the number of hours of involvement with each activity or organization (where requested).
- Specify any offices held.
- Type or print (clearly).

SCHOOL/COMMUNITY ACTIVITY RECORD

School and Community Organizations / Activities (Indicate # hours per month involved with each)	9 hrs/mo	10 hrs/mo	11 hrs/mo	12 hrs/mo	College hrs/mo

Awards / Honors / Personal Achievement	9	10	11	12	College

Employment (If applicable) (Indicate # hours per week)	9 hrs/wk	10 hrs/wk	11 hrs/wk	12 hrs/wk	College hrs/wk



**LETTER OF RECOMMENDATION #1 – Educator – not a family member
(Teacher, Counselor, Administrator, School Coach, College Professor)**

Directions:

- Recommendation must be typed and attached to this form which must be filled out completely. Be sure to include **applicant's name, name of scholarship, your name, signature, and title** on the letter of recommendation.
- **Letters of recommendation must address each category SEPARATELY or they WILL BE considered incomplete.**
Limit your statement to approximately 200 words for each category. Judges must be able to evaluate and score each category independently. Scholarships are awarded based on the highest cumulative scores. (Please note that letters of recommendation for college admission will not be considered.)
- Please provide situations/examples that demonstrate achievement in each category. Add other items that may be of interest to the committee.
- Letter **must** be **double-spaced**. Font size **must** be 12 pt. or larger. A standard font is required. Do not hand write.
- **DEADLINE:** Postmarked by **February 5, 2010**. Return with application or send under separate cover to:
CTA Human Rights Department, c/o Janeya Collins, P.O. Box 921, Burlingame, CA 94011-0921.
- **Points will be deducted if the guidelines are not followed.**

EACH CATEGORY MUST BE ADDRESSED SEPARATELY!

1. Involvement in and sensitivity to human, social and civic issues that reflect responsibility, reliability and integrity.
(Limit response to approximately 200 words).

Office Use
Score

2. Educational and personal achievements that reflect Academic and vocational potential. (Limit response to approximately 200 words).

Score

Signature _____ Title _____

Printed Name _____ School _____

No. of year(s) you have known applicant _____ Date _____



LETTER OF RECOMMENDATION #2 - Community Member
(Must Be From Someone Outside Of The Public/Private School Setting –
No educators or immediate family members)

Directions:

- Recommendation must be typed and attached to this form which must be filled out completely. Be sure to include **applicant's name, name of scholarship, your name, signature, and relationship to applicant.**
- **Letters of recommendation must address each category SEPARATELY or they WILL BE considered incomplete.**
Limit your statement to approximately 200 words for each category. Judges must be able to evaluate and score each category independently. Scholarships are awarded based on the highest cumulative scores. (Please note that letters of recommendation for college admission will not be considered.)
- Please provide situations/examples that demonstrate achievement in each category. Add other items that may be of interest to the committee.
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- | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|
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(Limit response to approximately 200 words). | Office Use
Score <input type="text"/> |
| 2. Educational and personal achievements that reflect Academic and vocational potential. (Limit response to approximately 200 words). | Score <input type="text"/> |

Signature _____ Relationship to Applicant _____

Printed Name _____ Company/Organization _____

No. of year(s) you have known applicant _____ Date _____