

**Pennsylvania ASCD Mission Statement:**

Inspire educators to lead, learn, and advocate.

**2023-2024 STUDENT SCHOLARSHIP APPLICATION**

**PART I. STUDENT INFORMATION:**

 **(Type or print clearly using black ink.)**

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Last name first middle initial

Date of Birth: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Telephone: (\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Street/Box City State Zip

College/University \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Academic level for the school year **2023-2024** (must be full-time): **8 pts.**

Sophomore \_\_\_\_\_\_ Junior \_\_\_\_\_\_\_ Senior \_\_\_\_\_\_\_\_\_ 5th Year\_\_\_\_\_\_\_

Field of Education:

PreK-4 \_\_\_\_\_ Middle Level Secondary \_\_\_\_\_ Special Education \_\_\_\_\_

Vocational \_\_\_\_\_ (specify \_\_\_\_\_\_\_\_\_\_) Other \_\_\_\_\_ (specify\_\_\_\_\_\_\_\_\_\_)

Employed **during Academic Year**: No \_\_\_\_\_ Yes\_\_\_\_\_ Hours per week? \_\_\_\_\_ **10 pts**

Name of employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Work Telephone: (\_\_\_) \_\_\_\_\_\_\_\_\_\_

Address of employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Job Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Job Responsibility: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ATTACH VERIFICATION OF EMPLOYMENT (W2 Form)**

**PLEASE BLACK OUT SOCIAL SECURITY NUMBER!)**

**Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**PART II. Extra Activities/Projects/Awards/Recognitions: 30 pts.**

**A. College/University Activities/Projects:** Leadership Position:

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**B. Community Activities/Projects:** Leadership Position:

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**C. Academic Awards/Recognitions:**

1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**In no more than 200 words indicate which activity/project or award/recognition (listed above) you feel has been most valuable and meaningful to you in various aspects of your life and why (explaining how it has impacted your life). \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**PART III. ESSAYS 40 pts.**

**Instructions: In no more than 500 words per essay (approximately the length of this page, single-spaced), respond to the following two prompts. Your essays should be well organized, thoughtful, concise, and grammatically correct.**  **Your essays will be scored using the PA Writing Rubric.**

**A.** Introduce yourself to the scholarship committee. In your response, detail how your personality, academic background, and extra activities have specifically prepared you for your role as an educator.

**Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**B.** What is the most important issue facing education today? Why do you feel this issue is more important than other issues?

**Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**C. APPLICANT’S STATEMENT/SIGNATURE**

 I certify that all of the information contained within this application is correct to the best of my knowledge. I understand that information about me may be shared with the public, if I am the recipient of the scholarship.

I also certify that I am a permanent legal resident of Pennsylvania and in the 2023-2024 school year will be enrolled in either my **second, third or fourth** year of study, or in a **fifth year** of study, for the purposes of earning teacher certification, and/or that I am a **full-time** education major.

 I acknowledge that it is my responsibility to ensure that this application is complete and returned prior to the **April 30th** deadline.

I understand that should I be selected for this award, my parents (if I am a dependent) will be required to submit verification of their income level to PASCD for the need-based part of this award.

Applicant’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_

**Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**PART IV. PARENT INFORMATION (required if student is a dependent)**

**(Type or print clearly in black ink.) 22 pts.**

**A. Identification/Occupation (type or print clearly using black ink)**

Father’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Father’s Income (From 2022 Tax Return): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother’s Income (From 2022 Tax Return): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**B. Parent’s Statement/Signature (required if student is listed as a dependent on their parent’s income tax forms)**

I have reviewed the information on this form and give permission for my son/daughter to proceed with the application process. I authorize my child’s college/university and its employees to release any information necessary for this application.

I acknowledge that it is my son’s/daughter’s responsibility to make sure the application is completed and returned by the **April 30th** deadline.

I will provide copies of my W-2 and/or Tax Return for 2022 if my son/daughter is selected for this award to verify scholarship need, and understand that failure to do so will result in my son/daughter not receiving this award.

Father’s Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_

Mother’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_

**Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**PART V. PROFESSOR’S REFERENCE FORM & LETTER 20 pts.**

**Procedures:**

1. A professor who has had the applicant in class may complete the form and write a

letter. The applicant need not be a current student of the professor.

2. The form must be completed using the criteria listed. PASCD is seeking evidence of a mature and conscientious student who will commit to continuing his/her studies in the field of education. PASCD is seeking a student who will become a future teacher leader by providing the best education possible for the students of the future.

3. PASCD asks you sign and date this form and return it, and your letter, to the student. If you wish, you may submit this form and letter to **PASCDscholarship@gmail.com**, however, PASCD strongly prefers you return these materials to the applicant so they can submit their complete application in one file.

All materials must be submitted by the deadline of **April 30th, 2023**. The application will be disqualified if it is late or incomplete.

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Professor’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Subject \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**A.** For each item below, please assign one of the following values, using the letter indicated.

 A= Exceptional B=Above Average C=Average

 \_\_\_\_\_ analytical ability \_\_\_\_\_ initiative

 \_\_\_\_\_ organizational skills \_\_\_\_\_ leadership ability

 \_\_\_\_\_ written expression \_\_\_\_\_ oral expression

 \_\_\_\_\_ reaction to criticism \_\_\_\_\_ capacity for creativity

 \_\_\_\_\_ service to school and/or community

 \_\_\_\_\_ interpersonal skills (ability to communicate and collaborate effectively)

**B. SUMMARY COMMENTS:**

Please write a letter of recommendation of sufficient length about this applicant’s ***strengths and weaknesses***. What factors make this student especially worthy of receiving scholarship support (academic achievement, talent, self-direction, minority status, non-traditional, low-income, etc.)? In your letter, please indicate how long you have known the student, and what classes you have specifically taught the student in. We are especially interested in your direct and personal observations of the student both in and out of the classroom. Your response to this query will be weighed heavily by the committee in making their selection. **Please attach a separate letter on university letterhead**.

**Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**PART VI. ADVISOR’S REFERENCE FORM & LETTER 20 pts.**

**Procedures:**

1. The form must be completed using the criteria listed. PASCD is seeking evidence of a mature and conscientious student who will commit to continuing his/her studies in the field of education. PASCD is seeking a student who will become a future teacher leader by providing the best education possible for the students of the future.

2. Please sign and date this form and return it, along with your letter, to the student. The student must submit the completed application by the postmark dead-line of **April 30th, 2023**. The application will be disqualified if it is late or incomplete.

3. PASCD asks you sign and date this form and return it, and your letter, to the student. If you wish, you may submit this form and letter to **PASCDscholarship@gmail.com**, however, PASCD strongly prefers you return these materials to the applicant so they can submit their complete application in one file.

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Advisor’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. For each item below, please assign one of the following values, using the letter indicated.

 A= Exceptional B=Above Average C=Average

 \_\_\_\_\_ analytical ability \_\_\_\_\_ initiative

 \_\_\_\_\_ organizational skills \_\_\_\_\_ leadership ability

 \_\_\_\_\_ written expression \_\_\_\_\_ oral expression

 \_\_\_\_\_ reaction to criticism \_\_\_\_\_ capacity for creativity

 \_\_\_\_\_ service to school and/or community

 \_\_\_\_\_ interpersonal skills (ability to communicate and collaborate effectively)

Advisor’s Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**D. SUMMARY COMMENTS:**

Please write a letter of recommendation of sufficient length about this applicant’s ***strengths and weaknesses***. What factors make this student especially worthy of receiving scholarship support (academic achievement, talent, self-direction, minority status, non-traditional, low-income, etc.)? In your letter, please indicate how long you have known the student. We are especially interested in your direct and personal observations of the student both in and out of the classroom. Your response to this query will be weighed heavily by the committee in making their selection. **Please attach a separate letter on university letterhead**.

Advisor’s Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PART VII. UNOFFICIAL TRANSCRIPT 10 pts.**

***DON’T FORGET TO INCLUDE YOUR UNOFFICIAL TRANSCRIPT!***