

Teaching. Learning. Leading.

## MEMBER SCHOLARSHIP

### Eligibility Criteria:

#### Applicants Must:

- Be accepted to a 2-year or 4-year program at an accredited institution of higher learning.
- Be an active Prince William Education Association member.

### Selection Committee:

A selection committee made up of members of the Prince William Education Association reviews all Scholarship applications on a competitive basis. The decisions of the committee are final.

**Deadline:** Complete application in full and return to:

Prince William Education Association  
8510 Bucyrus Court  
Manassas, VA 20110

**Your application must be returned by 4:00 p.m., March 26, 2010. You must include your essay and two letters of recommendation with your application.**

**INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED. Please type or print; attach additional sheets if needed.**

Designated # \_\_\_\_\_

**PWEA MEMBER  
SCHOLARSHIP APPLICATION**  
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**Please type or print – attach additional sheet(s) as needed** \_\_\_\_\_

**Part I – Applicant Information**

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

**Address:** \_\_\_\_\_

\_\_\_\_\_

**Phone No: ( )** \_\_\_\_\_

**Work Location:** \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Designated # \_\_\_\_\_

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SCHOLARSHIP APPLICATION**

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Length of Membership: \_\_\_\_\_

Number of years in PWCPS: \_\_\_\_\_

Name and address of institution you are planning to attend:

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

List total gross household income: \$ \_\_\_\_\_

List sources and amounts of income or financial assistance for applicant's education (include pension, child support, and insurance, Social Security, trust funds or other scholarships available for applicant).

<u>Source</u>	<u>Amount</u>
_____	\$ _____
_____	_____
_____	_____
_____	_____

Estimated Annual College Expenses: \$ \_\_\_\_\_

**ALL INFORMATION MUST BE FILLED IN ON THIS APPLICATION.  
ADDITIONAL INFORMATION MAY BE ATTACHED TO THIS FORM.**

- List other professional associations:

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

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**PWEA Member  
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- List community and/or professional activities

_____	_____
_____	_____
_____	_____
_____	_____

**Employment History:**

<u>JOB TITLE</u>	<u>EMPLOYER</u>	<u>DATES EMPLOYED</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**On a separate sheet:**

- Write a paragraph stating why you feel you are deserving of this Scholarship.

**LETTERS OF RECOMMENDATION** (Must be included with this application)

Names of persons furnishing letters of recommendation:

1. \_\_\_\_\_ Relationship: \_\_\_\_\_
2. \_\_\_\_\_ Relationship: \_\_\_\_\_