
Scholarship Application Form
Glenn Moon Scholarship Fund, Inc.
Association of Retired Teachers of Connecticut

The following materials **must** be included **in the order listed below**. (Incomplete and incorrect applications will not be considered.)

1. **Scholarship Application Form**, pages 1, 2, 3, and 4.
2. **Essay** detailing reasons for choosing teaching as a career, desired subject/level to teach, and experience with teaching, tutoring, and or working with students.
3. **Letters (2) of recommendation**, one from guidance and another from a teacher or other influential adult (not family member).
4. **SAR** (Student Aid Report) from FAFSA.
5. **Official high school transcript** including grades (9th grade through first semester of 12th grade), class rank (if used by school), and SAT scores.

*****Package must be postmarked no later than March 31, 2010.*****

Applicant Information (Please print.)

Full Legal Name: _____
LAST FIRST MIDDLE

Gender: ___ Male ___ Female

Mailing Address: _____
STREET TOWN ZIP

Phone Number: Home _____ Cell _____

High School: _____

Address _____

Guidance Counselor _____ Phone _____

Expected Date of Graduation _____ / _____
MONTH YEAR

Employment History: If you have worked regularly, please complete the following section. You may include informal work such as babysitting, chore help, etc. (names of families not needed). Attach additional page if necessary.

Employer _____ City _____ State _____

Type of Work _____

Average hours per week _____ Dates employed: from _____ to _____
MONTH/YR MONTH/YR

Employer _____ City _____ State _____

Type of Work _____

Average hours per week _____ Dates employed: from _____ to _____
MONTH/YR. MONTH/YR

Volunteer and Community Service: Attach additional page if necessary.

Organization _____ City _____ State _____

Type of Service _____

Time Volunteered _____ Dates Volunteered _____

Organization _____ City _____ State _____

Type of Service _____

Time Volunteered _____ Dates Volunteered _____

Extracurricular, Sports, and Other Activities: Briefly list your other activities in and out of school and your involvement. Attach additional page if necessary.

<u>Activity</u>	<u>Positions, Awards, Accomplishments</u>
_____	_____
_____	_____
_____	_____

College Applications List the name(s) of the college(s) to which you have applied and the status of the application(s). If you have committed to one, please circle your choice.

<u>College</u>	<u>Status</u> (Check one.)
_____	___ pending ___ deferred ___ accepted
Amount of financial aid offered by college \$_____	
_____	___ pending ___ deferred ___ accepted
Amount of financial aid offered by college \$_____	
_____	___ pending ___ deferred ___ accepted
Amount of financial aid offered by college \$_____	
_____	___ pending ___ deferred ___ accepted
Amount of financial aid offered by college \$_____	

Other Scholarships Please list the name(s) of any other scholarship(s) for which you have applied and the status of your applications. Attach additional page if necessary.

<u>Scholarship Name</u>	<u>Organization</u>	<u>Status</u>	<u>Amount</u>
_____	_____	___ pending ___ awarded	\$ _____
_____	_____	___ pending ___ awarded	\$ _____
_____	_____	___ pending ___ awarded	\$ _____

Family Information

___ Mother or ___ Guardian...Name _____ Phone _____

Address _____ E-mail Address _____

___ Father or ___ Guardian...Name _____ Phone _____

Address _____ E-mail Address _____

Number of Siblings ___ Ages _____ Number In Household Attending College Next Year _____

Number of other dependents living in household (grandparents, foster children, relatives) _____

Additional Information Please use the lines below to briefly explain any personal or family circumstances or information that you think would help the scholarship committee when reviewing your application.

The undersigned hereby certifies that the information provided in this application is true to the best of their knowledge. Knowingly providing erroneous or misleading information will render this application ineligible for consideration.

STUDENT APPLICANT SIGNATURE

DATE

PARENT(S) / GUARDIAN(S) SIGNATURE(S)

DATE

**ONLY HARD COPY APPLICATIONS WITH SIGNATURES WILL BE ACCEPTED.
INCORRECT OR INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.
PLEASE PROOFREAD YOUR APPLICATION BEFORE MAILING.**

Mail complete package, in the order specified on page 1 of this application.

Mail no later than March 31, 2010, to:

**Terry Barton
580 Stafford Ave. #16C
Bristol, CT 06010**