

# New London County Retired Teachers Association

## Scholarship Application Form

The following materials **must** be included **in the order listed below**. (Incomplete and incorrect application 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. **Financial Data:** Student Aid Report (SAR) from FAFSA..
5. **Official High School Transcript:** including grades (9<sup>th</sup> grade through 1<sup>st</sup> semester of 12<sup>th</sup> grade), class rank (if used by school), and SAT scores, if available.

**\*\*\*Package must be postmarked no later than April 15, 2022.\*\*\***

**Applicant Information:** (Please print.)

**Full Legal Name:**

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Last First Middle

**Mailing Address:**

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Street Town Zip

Email: \_\_\_\_\_

**Phone Number:**

Home: \_\_\_\_\_ Cell: \_\_\_\_\_

**High School:**

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**School Address:**

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**Guidance Counselor:** \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

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

Employer: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_

Type of Work:

\_\_\_\_\_

Average hours per week \_\_\_\_\_

Dates employed: \_\_\_\_\_ to \_\_\_\_\_

Month/Yr

Month/Yr

Employer: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_

Type of Work:

\_\_\_\_\_

Average hours per week \_\_\_\_\_

Dates employed: \_\_\_\_\_ 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>Awards, Accomplishments</u>	<u>Positions,</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)
_____	<input type="checkbox"/> pending <input type="checkbox"/> deferred <input type="checkbox"/> accepted
Amount of financial aid offered by college \$_____	
_____	<input type="checkbox"/> pending <input type="checkbox"/> deferred <input type="checkbox"/> accepted
Amount of financial aid offered by college \$_____	
_____	<input type="checkbox"/> pending <input type="checkbox"/> deferred <input type="checkbox"/> accepted
Amount of financial aid offered by college \$_____	
_____	<input type="checkbox"/> pending <input type="checkbox"/> deferred <input type="checkbox"/> 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.

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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.

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Student Applicant  
Signature

Date

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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 it no later than April 15, 2022, to the Scholarship  
Chairperson:**

**Trenda Caron  
106 Park Avenue  
Uncasville, CT 06382**