

SAN DIEGO EDUCATION ASSOCIATION

10393 San Diego Mission Rd. #100, San Diego, CA 92108

MEMBER SCHOLARSHIP APPLICATION

INCOMPLETE APPLICATIONS OR APPLICATIONS FORWARDED DIRECTLY TO THE SDEA BOARD OF DIRECTORS WILL NOT BE CONSIDERED.

Return Completed Application by Friday, May 3^{rd,} 2024, no later than 5:00 p.m.:

- **Emai**l: All documents must be sent in one (1) email to SDEA Secretary Lisa, steinberg_L@sdea.net.
- U.S. Mail: Date received must be prior to Friday, May 3rd at 5pm Attn: Lisa Steinberg

INFORMATION CHECKLIST THE APPLICANT IS RESPONSIBLE FOR THE FOLLOWING:

Applicant Cover Sheet
Activity Records
Applicant's Statement
 Letters of recommendation should not be from family members Letters of recommendation should be dated within the past year One from school personnel. One from a community member whose knowledge of the applicant comes from outside the school setting.
Transcripts – College Most recent/current college transcripts MUST accompany this application. Unofficial are acceptable.

SAN DIEGO EDUCATION ASSOCIATION SCHOLARSHIP

"CRITERIA FOR SDEA MEMBER ELIGIBILITY & EVALUATION"

To be eligible for an SDEA scholarship, an applicant must:

- 1. Be a **current member** of SDEA/CTA/NEA.
- 2. Show a potential for successful use of the scholarship funds.
- Present a completed application form with **TWO** letters of reference.
 One letter must be from a person who is acquainted with the applicant's professional performance. One letter must be from a community member, outside of the school setting.
- 4. Please be aware that if you have been previously awarded an SDEA Scholarship, you are not eligible to reapply.



NOTE:

SCHOLARSHIP GRANTS ARE LIMITED TO THOSE PERSONS WHO QUALIFY AS STUDENTS AS AFFIRMED BY REGISTRATION IN AN APPROVED INSTITUTION OF HIGHER LEARNING.

FAILURE TO COMPLETE ALL APPLICATION MATERIAL WILL RESULT IN DISQUALIFICATION OF YOUR APPLICATION.

SDEA MEMBER APPLICANT COVER SHEET

/lember	's Name:	Cell phone:		
School S	Site:			
Home Ad	ddress:	City	State	 Zip
		INSTRUCTIONS TO APPLICA	NT:	·
1.	Answer ALL questions	and complete ALL blanks in ink o	r electronically .	
2.	When questions do not apply, write NA (Not Applicable).			
3.	Submit ONLY TWO LETTERS OF REFERENCE on the proper forms (or attach to the proper forms).			
		ool colleague (Certificated). one in the community (Not school	related).	
4.	Submit college transcripts (must accompany this application to qualify). <u>Include MO</u> <u>RECENT GPA transcript information.</u>			
Pleas		olleges you have attended: Date of Attendance: Diplom	na/Degree: Last G	·ΡΛ
			-	
Pleas	e list the school you pla	n on attending in the future and int	ended major.	
Name	e of College	Location	Course	Work
		end to enter an accredited school o the funds, if awarded, for that purp	•	as a part/full tim
Signa	ature		nte	

Applicant's Nam	e: First	MI	Last	
	SDEA M	EMBER ACTIVIT	TY RECORD	
Community/Volu	nteer Activities:			
Employment:				

Awards, Honors, etc.:
Professional Activities: (Local, State and National)
NEA/CTA/SDEA/Union Activities:

Applicant's Name:				
• •	First	MI	Last	

APPLICANT'S STATEMENT

SDEA MEMBER ONLY

Briefly <u>state in 200 words or less</u> how continuing your studies will help you in the classroom and/or in your professional life. Your statement must be typed.

Applicant's			
	First	MI	Last
	LETTER OF	REFERENCE - SCHO	OL RELATED
			one letter of reference from SCHC se consider the following traits:
•		d commitment to social respolvement in community organ	
•	Demonstrate charact stability.	er traits such as responsibili	ty, reliability, integrity, and emotion
•	Have a grade point a	verage reflecting above-ave	rage academic achievement.
•	Show academic and	vocational potential.	
•	Have special achieve	ments showing a broad part	ticipation.
•	Any other items that i	may be of interest.	
	Please ty	oe and attach your letter to	o this sheet.
•			
_			1:
Print Name:	•	Instituti	on:

of Years Known Applicant:_____

Date:_____

	s Name: First	MI	Last
	LETTER OF REF	ERENCE - <u>NON-SC</u>	CHOOL RELATED
	cant for the SDEA scholars RELATED PERSON who ki		ONE letter of reference from a NO onally.
When writir	ng your letter for the applica	ant, please consider the	following traits:
•	 Have a sensitivity and commitment to social responsibilities that have been demonstrated by involvement in community organizations. 		
•	Demonstrate character traits such as responsibility, reliability, integrity, and emotion stability.		
•	Have a grade point aver	age reflecting above-ave	erage academic achievement.
•	Show academic and voc	cational potential.	
•	Have special achieveme	ents showing a broad pa	rticipation.
•	Any other items that may	y be of interest.	
	Please type	and attach your letter	to this sheet.

Signature:	Position:
Print Name:	Institution:
# of Years Known Applicant:	Date: