

ENNIS RETIRED SCHOOL PERSONNEL ASSOCIATION SCHOLARSHIP FOR ENNIS HIGH SCHOOL

Eligibility: Students majoring in education with a goal of teaching in a public school system.

Application deadline: APRIL 30, 2024

Return completed applications to EHS Office.

Application Requirements: All of the following items must be complete and included when returned. Failure to do so will invalidate the application.

- 1. Completed application (pages 2-3)
- 2. Completed Activity Form (pages 4-5)
- 3. Type written answers to the questions from the application. (page 1)
- 4. Three Letters of Recommendation: (teacher, counselor, advisor, clergy, etc.)
- 5. Attendance Report (To be obtained from the high school counselor's office.)

Questions to be answered in typewritten form. These are not essay questions, but they must be answered in well thought out complete sentences.

- 1. What 3 teachers positively affected your life? How? What did they teach? What grade/subject?
- 2. When did you decide teaching was the profession for you? Why?
- 3. What grade level and/or subject would you like to teach? Why?
- 4. Why teaching instead of another occupation?

Personal Information: Name of Applicant: Home Address: City: _____ Zip Code: _____ Phone Number: _____ Date of Birth: _____ Email Address: Family: Parent/Guardian Name: Phone Number: ____ Email Address: Occupation/Employer:____ Parent/Guardian Name: Phone Number: Email Address: Occupation/Employer:____ **Financial Information:** Approximate yearly family income: \$ Number of children living in household: _____ Number in college: _____ **Scholastic Information:** I have successfully passed the state required tests for graduation. ___Yes No

What is your Grade Point Average?
SAT Scores: V M Date Taken (Month/Year):
ACT Scores: Reading Sci. Reas Math
Date Taken (Month/Year):
Have you participated in AVID?NoYes
Number of years:
How many Dual Credit hours?How many AP hours?
To which Colleges/Universities have you been accepted (in order of preference)?
1
2
3
Parent/Legal Guardian Signature:
Print Name:
Date:
Applicant's Signature:
Print Name:
Date:

Should you be a recipient of this scholarship, you will receive a Voucher to present to the college/university when you enroll. The actual check will be sent directly to the college/university once they notify the ERSPA treasurer of your enrollment.

our Name:						
	Activ	rity Form				
ease FILL OUT CAREFULLY. Include club membership, office held, extracurricular activities an nors outside of school. Attach an additional sheet if necessary. (School Year, Club, Athletics, Bancher, Officer/Honor)						
Extra Curricular Activities	School Year	Offices/Positions Held, Awards, Special Achievements Earned	Contact Person for Verification			

Community/Church Volunteer Activities: UIL service hours, Scouts, civic group, VBS, Music, public library, Relay for Life, missions, community theater, etc.

Activity	Year	Contact Person for Verification	
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Work Experience Examples: Babysitting, Lawn Mowing, School Work Program, Summer Jobs

Work Experience Employer	Dates	Hours per Week	Supervisor