

Region XII ATPE Professional Scholarship (Given Annually-\$1000)

Name: _____ (Last, First, MI)

Address: _____

Telephone: (Home) _____ / _____ (Bus.) _____ / _____

Teaching Field(s): _____

School District: _____

Member of _____ ATPE Local

REQUIREMENTS

1. You must be a member of both state and local ATPE organizations.
2. You must be seeking certification in some field of education or in a field related to your teaching field.
3. You must submit two recommendations for the committee's consideration. One must be from a fellow employee and both should be in letter form.
4. Applicant must be a degreed educator.
(Associates need to apply for the Associate Scholarship).
5. Your completed application must be returned and/or postmarked no later than **April 10, 2010.**

Mail to:

**Patty Reneau
3325 Ethel Avenue
Waco, Tx 76707**

Note: The committee will determine the recipient the week of **May 18, 2010.** Each applicant will receive results of the committee's decision

Please respond to the following essay questions:

1. Identify your educational goal(s); explain how your plans for further education will enable you to achieve your goal(s).
2. Because financial need will be considered, explain how this scholarship will help you to provide the means to achieve your educational goal(s).
3. Describe your involvement in ATPE.

Note: Please attach your responses to this application and mail four copies to the Chair person listed above. Copies will be distributed to the committee members.