

## 2023-2024 TENNESSEE PARENT TEACHER ASSOCIATION (PTA) TEACHER/CHILD-RELATED SERVICES SCHOLARSHIP APPLICATION

**This application is due on or before Feb.15, 2024. Mail the completed application to:  
Tennessee PTA, 5006 Jim Jones Lane, Knoxville, TN 37931 or email it to [ptastateoffice@tnpta.org](mailto:ptastateoffice@tnpta.org).**

### **Purpose of Scholarship**

The Tennessee Parent Teacher Association (PTA) established and maintains a Scholarship Fund to provide financial assistance to young people pursuing a bachelor's degree toward the goal of becoming a teacher or working in a child-related field such as: education, medicine, law or any new field of child related studies.

### **Scholarship Value**

Each scholarship this 2023-2024 year provides a one-time \$1000.00 non-renewable award.

### **Requirements for Scholarship**

- Applicant must be a 2023-2024 graduating senior from a Tennessee high school,
- Applicant must enroll in a two or four-year Tennessee college or university and pursue a teaching or child-related degree,
- The applicant or a family member of the applicant must be an active member of a PTA/PTSA.

### **Completing the Application**

The original plus three (3) copies of the complete application packet must be received by the Tennessee PTA Office on or before **Feb. 15, 2024**. The complete application packet must include the following:

- Completed Application
- Principal/Guidance Counselor Report
- Essay that is 500 words or less, typed and double-spaced
- Two (2) letters of recommendation
- Official high school transcript

### **Scholarship Notification**

When the review process is complete, an award notification letter from Tennessee PTA will be mailed to the recipient and their high school guidance counselor/principal.

The applicant will be considered on the following points:

- Essay
- Academics
- Sincerity of purpose/personality
- Motivation
- Community Involvement
- Letter of Recommendations

**Any application that is incomplete or does not meet the stated requirements will be disqualified without exception.**

SCHOLARSHIP APPLICATION

This section is to be completed by the student.

STUDENT INFORMATION

Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Address (if different from above): \_\_\_\_\_

Number of Siblings: \_\_\_\_\_ Age(s) of Siblings: \_\_\_\_\_

*If siblings are in college, please indicate what year:* \_\_Freshman \_\_Sophomore \_\_Junior \_\_Senior

Have you filed a FAFSA application? \_\_\_\_\_

Have you applied for other financial aid? \_\_\_\_\_

Have you received any other scholarships or financial aid? \_\_\_\_\_

HIGH SCHOOL INFORMATION

School: \_\_\_\_\_ County: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Principal's Name: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_

COLLEGE/UNIVERSITY INFORMATION

Name of college/university you plan to attend: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_

Date you will begin higher education: \_\_\_\_\_ Expected date of completion of degree: \_\_\_\_\_

Name of Degree Sought and Major Field of Study: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



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## ADDITIONAL INFORMATION

Name of PTA/PTSA of which you or a family member is a member: \_\_\_\_\_

National PTA Unit ID number (found on membership card): \_\_\_\_\_

**Essay:** On a separate sheet of paper, in 500 words or less, typed and double spaced, please tell us about yourself and how you can impact the lives of children in your chosen area of study.

\_\_\_\_\_

**Activities:** Please attach your list of high school and community activities, PTA/PTSA events you have been involved with, etc., (including offices held, membership in organizations, and participation in other activities you feel are important):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_

**Letters of Recommendation:** Please attach two (2) letters of recommendation

Note: No applicant will be considered if this application is incomplete or if the following documents are not received by the due date: principal/guidance counselor report, essay, transcript and two letters of recommendation. **THE ORIGINAL APPLICATION AND THREE (3) COPIES OF THE COMPLETED APPLICATION PACKET MUST BE RECEIVED BY THE TENNESSEE PTA OFFICE ON OR BEFORE FEB. 15, 2024.**

***I certify that the information given in this application is complete and accurate.***

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PRINCIPAL / GUIDANCE COUNSELOR REPORT**  
This report is to be completed by school authority after application is complete

This report is completed from: \_\_\_ Personal Knowledge \_\_\_ Report of Others \_\_\_ Official Records

**Academics**

Applicant's Rank: \_\_\_ out of \_\_\_ GPA: \_\_\_ ACT Composite: \_\_\_ SAT: \_\_\_

Has the applicant taken the normal college preparatory courses? \_\_\_\_\_

**Motivation**

Has the applicant expressed a desire to work with children? \_\_\_\_\_

Why do you think the applicant will be successful in a child-related field? \_\_\_\_\_

**Attendance**

Average high school attendance (please circle): Excellent      Good      Average      Poor

Main reasons for absences? \_\_\_\_\_

**Character**

Please rate each of the following as *Excellent (E)*, *Good (G)*, *Average (A)*, or *Poor (P)*

Social Maturity	E G A P	Reliability	E G A P
Initiative	E G A P	Dependability	E G A P
Loyalty	E G A P	Courtesy	E G A P
Thoroughness	E G A P	Cooperation	E G A P
Neatness	E G A P	Influence on others	E G A P

Do you believe the applicant has a reasonable expectation for success in college? \_\_\_\_\_

The Principal/Guidance Counselor is requested to review this report, the application, essay, transcript, and letters of recommendation with the applicant prior to mailing.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_