



North Carolina Council of Epsilon Sigma Alpha Scholarship
STUDENT APPLICATION

Applicant must complete and mail of all sections of this application with postmark no later than April 1 to:
Jane Winn 7306 Easen Court Charlotte, N.C. 28211 scholarship-chair@esa-nc.org http://www.esa-nc.org/scholar\_board.php

Applicant Name \_\_\_\_\_

Applicant's Current Address \_\_\_\_\_

Email address \_\_\_\_\_ Telephone where you may be reached (\_\_\_\_\_) \_\_\_\_\_

Name of Parent or Spouse \_\_\_\_\_ Relationship \_\_\_\_\_

Home Address \_\_\_\_\_

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

Gross Parent Income for year 20\_\_\_ as reported on W2 \_\_\_ (this is applicable if parent is providing financial support for student's education)

Gross Spouse Income for year 20\_\_\_ as reported on W2 \_\_\_ (this is applicable if spouse is providing financial support for student's education)

College or university attending \_\_\_\_\_

Current Year: Freshman \_\_ Sophomore \_\_ Junior \_\_ Other \_\_ (specify)

GPA \_\_\_\_\_ based on \_\_\_\_\_ point system after \_\_\_\_\_ semesters (Most recent cumulative verified by transcript)

Major or field of study \_\_\_\_\_ Minor \_\_\_\_\_

Gross Student Income for year 20\_\_\_ as reported on W2 \_\_\_\_\_

Other source of funds (include part-time or summer employment, other scholarship or grants and loans)

All information must compare accurately with information given by the financial aid office.

- 1. Write a brief essay stating reasons for entering the field of special education and qualification for this career goal.
2. List any extra curricular activities that are school, community, or church based.
3. If applicable, write a statement of financial need or special circumstance for the Board's consideration.
4. Include one letter of recommendation from a teacher who can substantiate the applicant's qualifications to receive this scholarship.
5. If sponsored by a collegiate or community based Epsilon Sigma Alpha chapter or member, please include a letter of endorsement.

In accepting a scholarship from the North Carolina Council of Epsilon Sigma Alpha Scholarship Board, I agree to attend the above named college or university during the 20\_\_\_ school year. I agree to teach in the North Carolina Public School System as a teacher of exceptional children (excluding gifted and talented) for a minimum period of one (1) year after graduation. If I fail to honor these stipulations within three years of receiving the scholarship, I agree to return the scholarship award to the North Carolina Council of Epsilon Sigma Alpha Scholarship Board.

Signature \_\_\_\_\_ Date \_\_\_\_\_

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North Carolina Council of Epsilon Sigma Alpha Scholarship
STUDENT APPLICATION
FINANCIAL AID STATEMENT

Applicant Name \_\_\_\_\_

Dear Financial Aid Director,

The above mentioned student hereby grants permission to release a statement of financial need to the North Carolina State Council of Epsilon Sigma Alpha Scholarship Board. The information remains confidential with the Scholarship Board members.

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

To be completed by student and validated by college or university representative.

Name of college or university \_\_\_\_\_

Tuition costs, including approximate cost of books and fees for upcoming school year (1 yr) \$ \_\_\_\_\_

Anticipated Total Funds for 2012-2013:

1. Student financial support (1 yr) from parents and/or spouse \$ \_\_\_\_\_

2. Grants, scholarships, workstudy, etc. (1 yr) \$ \_\_\_\_\_

List of above \_\_\_\_\_
Teaching Fellow Yes \_\_\_ No \_\_\_ (should be included in #2 total)

3. Loans \$ \_\_\_\_\_

4. Student provided \$ \_\_\_\_\_

5. Deficit for 2012-2013 \$ \_\_\_\_\_

Comments or special circumstances
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_

Financial Aid Director's Signature (validating this form) \_\_\_\_\_ Date \_\_\_\_\_

Seal or Stamp \_\_\_\_\_

Please return to applicant in a sealed envelope. Please be aware that applicant must return all forms before April 1.

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North Carolina Council of Epsilon Sigma Alpha Scholarship
TEACHER APPLICATION

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I. PERSONAL INFORMATION

Name Email address

Address

Home Telephone (area code and number)

Present Occupation

Spouse's Name Occupation

Number of Children Ages of Children Number of dependents reported on 1040 income tax form

Total Combined Gross Income for year 20 as reported on 1040 income tax form

Current Civic or Community Organization Affiliations (Name and number of years)

Four horizontal lines for listing affiliations.

Hobbies and special interests

Two horizontal lines for listing hobbies and interests.

II. PROFESSIONAL INFORMATION

Table with 3 columns: College or University Attended, Years, Degrees or Credits Received. Includes four horizontal lines for data entry.

Specialized Training and Certifications

One horizontal line for specialized training and certifications.

Do you presently have a teaching certificate? What state(s)?

Certificate numbers Classes A-G Area

**North Carolina Council of Epsilon Sigma Alpha Scholarship**

**III. EXPERIENCE (LIST MOST RECENT POSITION HELD FIRST)**

<b>Years</b>	<b>School and Location</b>	<b>Position/Grade/Subject</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**IV. PERSONAL NARRATIVES**

**Write a short narrative about your teaching career thus far and your reasons for continuing your education. Include the population with which you are presently working.**

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

**State your reason for submitting a scholarship application including any statements of financial need.**

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

**V. CONTINUING EDUCATION**

**College or university you will be attending**

\_\_\_\_\_ **Location** \_\_\_\_\_

**Dates you will be attending** \_\_\_\_\_ **Credit hours/semester** \_\_\_\_\_

**Will you be attending summer school** \_\_\_\_\_ **Dates of summer school** \_\_\_\_\_

**VI. APPROXIMATE COSTS OF CONTINUING EDUCATION**

**Tuition per semester/session** \_\_\_\_\_

**Books and fees** \_\_\_\_\_

**Other financial needs (include description)** \_\_\_\_\_

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**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

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