



East Bay Division Scholarship Foundation, Inc.
California Retired Teachers Association
Email: ebdscholarshipfoundation@yahoo.com
Web Site: www.calrtadivision2.org
P.O. Box 1200, Alameda, CA 94501

Providing scholarships for future educators since 1984

January 21, 2019

Dear High School or Community College Career Counselor or Scholarship Contact Person,

It is time again for you to consider a candidate for a scholarship awarded by the East Bay Division Scholarship Foundation, Inc., of the California Retired Teachers Association. CalRTA is not affiliated with NEA/CTA Retired or CFT/AFT retired. The scholarships are granted to students who have a committed interest in pursuing a career in public education. The minimum amount of each scholarship is \$1,500.

The candidate must be a high school senior or attending of community college. Selection is based on:

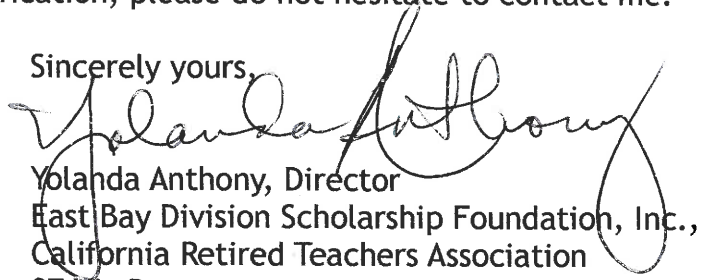
- (1) Committed interest in becoming a teacher in public education
- (2) Academic achievement
- (3) Financial need
- (4) Participation in school and community activities related to the field of education
- (5) Application to a or attendance at college or university

Information about the availability of this scholarship may be placed on your school website, but only one application can be submitted from your school by your contact person. Attached you will find more specific information and the application forms. For this scholarship please provide us with your staff person's name and contact information including an email address.

Applications will be due March 21, 2019, and candidate interviews will be held Thursday, April 18, 2019.

For further information or clarification, please do not hesitate to contact me.

Sincerely yours,



Yolanda Anthony, Director
East Bay Division Scholarship Foundation, Inc.,
California Retired Teachers Association
97 Via Pescara
American Canyon, CA 94503
707-553-1643
Email: llavud@att.net



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SCHOLARSHIP APPLICATION

For High School or Community College

I HEREBY CERTIFY THAT ALL INFORMATION ATTACHED IS ACCURATE AND COMPLETE. We give permission for Applicant's picture to be reproduced for promotional purposes including publication in the news media.

Applicant name printed _____
Applicant signature _____ Date _____
Parent/Guardian if applicable _____ Date _____
Scholarship Contact Person _____ Date _____

RETURN THIS APPLICATION, WITH ALL THE REQUESTED ATTACHMENTS TO:

Yolanda Anthony, Director
East Bay Division Scholarship Foundation, Inc., CalRTA
97 Via Pescara
American Canyon, CA 94503

COMPLETED APPLICATIONS MUST BE POSTMARKED BY MARCH 21, 2019

CHECKLIST

Have you included the all application components?

- ___ Completed application form
- ___ A statement of 100-150 words explaining why you want to enter the field of public education
(Including any activities related to teaching students)
- ___ Official transcript
- ___ 3.0 Grade point average and proof of passing all graduation requirements
- ___ Summary of extra-curricular, community activities and work experience
- ___ A confidential statement of financial need (form attached)
- ___ Two (2) letters of recommendation (one letter must be from a teacher or school administrator)
- ___ Proof of application to a post secondary school

Incomplete applications will not be accepted. All items from the checklist must be included with the application.

H. S. or Comm. College SCHOLARSHIP APPLICATION

(Return by your contact person's due date)

DEADLINE IS _____

Student Applicant

Current school and contact person

East Bay Division Scholarship Foundation, Inc., CalRTA

This nonprofit foundation was established in 1983 for the specific purpose of providing scholarships to students with financial need and academic promise who wish to pursue a career in the field of public education. The minimum scholarship awarded by the foundation is \$1,500.

SCHOLARSHIP APPLICATION CRITERIA

Qualifications for application:

- Committed to a career in public education
- Graduation from a public high school (including continuation high school) in Oakland, Alameda, Emeryville, San Leandro and Piedmont or attendance at one of the Peralta Colleges
- GPA of 3.0 or above
- Participation in education-related experiences (paid and/or volunteer)
- Proof of financial need
- Proof of application to an accredited, post-secondary institution

The applicant must submit the following documentation and information:

1. Completed application form
2. A statement of 100-150 words explaining why the candidate is committed to entering the field of public education (include any activities related to teaching students)
3. Official transcript
4. Grade point average and proof of passing requirements for graduation
5. Summary of extra-curricular and community activities and work experience
6. Confidential statement of financial need (form attached)
7. Two letters of recommendation, one letter must be from an instructor or school administrator
8. Proof of application to a post-secondary school

Candidates selected to receive the scholarship must present verification of registration in a post-secondary school within six months of receiving the award, or forfeit the award.

See your school's scholarship counselor/scholarship chairperson or contact person for application forms. Completed forms should be returned to that person. **Only one application will be accepted from each school.**

For inquiries: Yolanda Anthony, Director, East Bay Division Scholarship Foundation, Inc. CalRTA

Phone: 707-553-1643 Email: llavud@att.net

Current School _____

H. S. and Comm. College SCHOLARSHIP APPLICATION
(Return by your contact person's due date)
EAST BAY DIVISION SCHOLARSHIP FOUNDATION, INC., CaIRTA

Applicant's Name: _____
First Middle Last

Address _____
Street City State Zip

Home Phone: _____ Cell Phone: _____

Email: _____

Date of Birth _____

Grade Point Average: _____

Financial status of the Applicant

How do you plan to finance your education? _____

List the amount of annual support you expect from others. _____

Are you responsible for the support of another person? Yes ___ No ___

If "yes" explain _____

List the other sources from which you expect to receive assistance; include the amount.

I declare that the above information is true and correct. I believe that I qualify for a scholarship given by the East Bay Division Scholarship Foundation, Inc.

Signature

Date

H. S. or Comm. College SCHOLARSHIP APPLICATION (Return by your contact person's due date)

EAST BAY DIVISION SCHOLARSHIP FOUNDATION, INC. CaIRTA

PARENT/GUARDIAN CONFIDENTIAL STATEMENT

Name of Parent/Guardian _____

First

Middle

Last

Address _____

No. Street

City

State

Zip

Phone: Home _____ Cell _____

Occupation/Profession: _____

Name of Parent/Guardian _____

First

Middle

Last

Address _____

No. Street

City

State

Zip

Phone: Home _____ Cell _____

Occupation/Profession: _____

Financial status (If Applicable)

Total adjusted gross income of both parents or guardians as reported on the most recent IRS Tax Form.

(If applicable) _____

Amount of annual support to be given applicant by parents or guardians -

Amount available to applicant from other sources _____

As a parent or guardian, I am financially responsible for the following family members.

Name	Relationship	Age
1. _____		
2. _____		

I/We state that the information reported on this form is true and complete. _____

Signature

Date