Educational Support Professionals Teaching Certification - Scholarship Application Form

Name _		Employee Number		
Applica	ation Date	Mailing Address		
City		State	Zip Code	
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nome r		Job Hile		
Home E	Email	Work Email		
College	e/University Attending			
Name o	of Education Advisor			
College	e/University Mailing Addre	ess		
City		State	Zip Code	
Applica	ant's Signature:			
			Date	
			Date	
Please i	include the following with	this application:		
	-		and the could be a place of the late of the country	
	Letter of application stating why you would like to be considered for this scholarship. Verification of ESP membership for the past three consecutive school years (email CUC			
	 Verification of ESP membership for the past three consecutive school years (email CUC office manager Chenoa Gray-Brewer at <u>CGray@WashingtonEA.org</u>). 			
П	Documentation and verification of junior credit equivalent or higher.			
П				
comprehensive education plan leading to certification.			during arroutime or a	
 If your coursework is online, please obtain a letter, SIGNED BY THE REGISTR 			er, SIGNED BY THE REGISTRAR OR	
	ACADEMIC ADVISOR, on university letterhead, verifying that you are currently			
	enrolled at this co	·	,b mat you are currently	
	Completed scholarship ap	•		

Please make a copy of your completed application and all attached documents for your records. Submit application and all original documents to Robbi Reed, robbi.reed@washingtonea.org.

APPLICATION DEADLINE IS WEDNESDAY, APRIL 19, 2023 at 5:00pm.