



MEA 15-B

Coordinating Council Scholarship 2010 Application

Four Three Hundred (\$300) Scholarships Granted:
Two granted to a child or dependent of a 15-B Support Staff (ESP) Bargaining Unit Member
Two granted to a child or dependent of a 15-B Teacher (EA) Bargaining Unit Member

Applicant Number: _____ (Office use only)

Name
(print): _____

Street Address: _____ City: _____ State: _____ Zip: _____
 Phone: _____/_____ Age: _____ Sex: _____ Social Security Number: _____/_____/_____

Signature of Applicant (**Required**): _____

Criteria of Selection

- | | |
|-----------------------------|-------------------------------|
| 1. Academic achievement | 3. Extracurricular Activities |
| 2. School/community service | 4. Application Content |

Eligibility

1. High School senior or a graduate of a high school in the 15-B Coordinating Council or an undergraduate student who graduated from a high school in the 15-B Coordinating Council and is currently attending college.
2. Will attend, or is currently attending, a public community/junior, degree granting institution or vocational training institution in Michigan, that grants a degree, certification or license.
3. At least one parent or legal guardian must be an MEA member in good standing and be employed in an MEA 15-B Coordinating Council School District.

Must Include:

1. Official high school transcript, including 1st semester senior year, and any higher education course transcripts.
2. SAT and/or ACT score documentation.
3. Personal resume' (must include items 2 and 3 in "Criteria of Selection").
4. Two letters of recommendation that address applicant's qualifications in meeting the selection criteria. (May not be a family member.)
5. Signatures on all four (4) pages on the lines provided (as required).
6. Signature of principal/designee or counselor (as required on page 3).

PLEASE NOTE: Only complete applications with required documentation submitted by authorized school personnel will be considered. (Decisions made by the 15-B Scholarship Committee will be final.)

DEADLINE: Application must be **postmarked no later than Friday, February 26, 2010. (No fax or e-mail applications will be accepted.)**

Please return completed application to:

15-B Scholarship Committee
 Michigan Education Association
 1337 N. Mitchell St. Suite B
 Cadillac, MI 49601

Personal Information

Name (print): _____ High School Graduation Year: _____

High School: _____ School District: _____

Grade Point Average: _____ ACT Score: _____ SAT Score: _____

Father/Guardian: _____ Place of Employment: _____

Position: _____ 15-B Member: EA ESP Not Applicable

Mother/Guardian: _____ Place of Employment: _____

Position: _____ 15-B Member: EA ESP Not Applicable

Michigan colleges and/or vocational institutions **APPLIED** to:

Michigan colleges and/or vocational institutions **ACCEPTED** by:

Career Choice (if decided): _____

How do you plan to finance your college education aside from this scholarship, should you receive it?

Signature of Applicant (**Required**): _____

