**Application Checklist**

**Please initial beside each line for forms enclosed**

**All forms must be enclosed for application to be considered**

**Student Application**

**\_\_\_ Student Application - Page 2 – Undergraduate/Graduate Students Only**

**\_\_\_ Personal Essay – Page 2 # 1 – Limited to 2 pages double-spaced.**

**\_\_\_ List of Activities including Leadership Roles – Page 2 #2**

**\_\_\_ One letter of recommendation from teacher**

**\_\_\_ One letter of recommendation if sponsored by ESA Chapter or member (if applicable)**

**\_\_\_ Financial Aid Statement to be completed by Financial Aid office – Page 3**

**\*\*Do not complete pages 4 & 5**

**Teacher Application**

**\_\_\_ Teacher Application Pages 4 & 5 – Continuing Education for current teachers**

**\_\_\_ Continuing Narrative Page 5 (if applicable)**

**\_\_\_ Financial Aid Statement to be completed by Financial Aid office if enrolled in 8 credit hours or more per semester– Page 3**

**STUDENT APPLICATION**

**Applicant must complete and mail of all sections of this application with postmark no later than April 1st to:**

**Sharon Frost 5512 Tangelo Dr Wilmington, NC 28412**

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

**Applicant’s Current Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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

**Single\_\_\_\_\_\_ Married\_\_\_\_\_\_\_ (Please check one)**

**Current Year: Sophomore \_\_\_ Junior \_\_\_ Senior \_\_\_ Other \_\_ (Please 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)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name of Parent \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name of Spouse \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent/Spouse Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent/Spouse 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 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**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, your career goals, and any qualifications 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 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Applicant must complete and mail of all sections of this application with postmark no later than April 1 to:**

**Sharon Frost 5512 Tangelo Dr Wilmington, NC 28412**

**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 year (1 yr)**

**Anticipated Total Funds for 2020-2021:**

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

**2. Grants, scholarships, work study, etc. (1 yr) $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**List of above \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Teaching Fellow Yes\_\_\_ No\_\_\_\_ (should be included in #2 total)**

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

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

**5. Deficit for 2020-2021 $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Comments or special circumstances**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**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.**

**Applicant must complete and mail of all sections of this application with postmark no later than April 1 to:**

**Sharon Frost 5512 Tangelo Dr Wilmington, NC 28412**

**TEACHER APPLICATION**

**Applicant must complete and mail of all sections of this application with postmark no later than April 1 to:**

**Sharon Frost 5512 Tangelo Dr Wilmington, NC 28412**

**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)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Hobbies and special interests \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**II. PROFESSIONAL INFORMATION**

**College or University Attended Years Degrees or Credits Received**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Specialized Training and Certifications \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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

**Certificate numbers \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Classes A-G \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Area \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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

**Years School and Location Position/Grade/Subject**

**\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**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.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**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) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**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 \_\_\_\_ summer session and/or 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. If I fail to honor either of the above stipulations, I agree to return the scholarship award to the North Carolina State Council of Epsilon Sigma Alpha Scholarship Board.**

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

**Applicant must complete and mail of all sections of this application with postmark no later than April 1st to:**

**Sharon Frost 5512 Tangelo Dr Wilmington, NC 28412**