

AFT MICHIGAN

AFT MICHIGAN MEMBER'S GRADUATING HIGH SCHOOL SENIOR SCHOLARSHIP APPLICATION

"2019 Rollie Hopgood Future Teachers Scholarship Award"

This scholarship application is for a graduating senior of an AFT Michigan dues paying member whose goal is to become a teacher. Two \$1,000 scholarships will be awarded. One scholarship will be awarded to a female and the other to a male graduating high school senior.

Selection process will be based on G.P.A., extra-curricular activities, community-related activities, financial needs and essay. **Please fill in all sections completely and accurately.**

Recipients must be enrolled full-time in an accredited university or college teacher program for the following fall term. **A copy of the letter of acceptance must accompany the application.**

The scholarship award will be issued in time for the beginning of the fall term.

APPLICATION INSTRUCTIONS AND CHECK LIST **(TYPE OR PRINT)**

The Application Form

- Complete all questions on the application (please type or print).
- Use "N/A" if a question is not applicable; do not leave a blank space.
- Do not forget to sign the application.
- Attach your most recent high school transcript and a letter of acceptance from the college or university that you will be attending in the fall.
- Complete the parent verification form.

Deadline

All parts of your application including references must be postmarked by midnight **June 7, 2019**. If delivered by other than the U.S. mail, all materials must be received in the AFT Michigan office by **4:00 p.m., June 7, 2019**.

REFERENCES/RECOMMENDATIONS MUST BE ENCLOSED AND RETURNED WITH APPLICATION.

PLEASE RETURN COMPLETED APPLICATION PACKAGE TO:

**AFT MICHIGAN SCHOLARSHIP COMMITTEE
2661 EAST JEFFERSON AVE.
DETROIT, MI 48207**

AFT MICHIGAN, AFT • AFL-CIO

**AFT MICHIGAN MEMBER'S GRADUATING HIGH SCHOOL SENIOR
SCHOLARSHIP APPLICATION**

"2019 Rollie Hopgood Future Teachers Scholarship Award"

PLEASE PRINT OR TYPE

Name _____

Date of Birth _____

Address _____

City _____ State _____ Zip _____

Home Telephone _____

Name of Current High School _____

High School Address _____

City _____ State _____ Zip _____

High School Telephone Number _____

Parent's Name _____

Parent's Local Union Name and Number _____

List colleges and universities to which you have applied. Please place a check mark next to the schools that you have been accepted.

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**AFT MICHIGAN MEMBER'S GRADUATING HIGH SCHOOL SENIOR
SCHOLARSHIP APPLICATION**

PARENT VERIFICATION FORM

Parent's Name _____

Home Address _____

City _____ State _____ Zip _____

Home Telephone _____

AFT Michigan Local Name _____

Job Title/Position _____

Work Telephone _____

Parent's Signature _____ Date _____

Local Union
Officer Name _____ Title _____

Dues Paying Member? Yes No

Local Union
Officer Signature _____ Date _____

THIS SHEET MUST ACCOMPANY THE APPLICATION

AFT MICHIGAN, AFT • AFL-CIO

**AFT MICHIGAN MEMBER'S GRADUATING HIGH SCHOOL SENIOR
SCHOLARSHIP APPLICATION**

COUNSELOR'S REFERENCE & RATING

NAME OF SCHOLARSHIP APPLICANT

COUNSELOR'S NAME

WORK PHONE

HOME PHONE

The person named above has applied for a scholarship through a program of the AFT Michigan. This person is requesting that you provide us with a reference to be used in processing this application.

We must receive your reference by June 7, 2019 in order for it to be valid. Please make note of the deadline.

PLEASE RANK THE APPLICANT'S SKILLS IN THE FOLLOWING AREAS BASED ON A "1" TO "5" SCALE.
1 = LOWEST - 5 = HIGHEST

	LOWEST			HIGHEST	
LEADERSHIP QUALITIES	1	2	3	4	5
SELF CONFIDENCE	1	2	3	4	5
RELIABILITY	1	2	3	4	5
SOCIAL SKILLS and RELATIONSHIPS WITH PEERS	1	2	3	4	5
INTEGRITY	1	2	3	4	5
MATURITY FOR AGE	1	2	3	4	5

Please provide us with a few sentences, which would describe the applicant. (Use a separate sheet of paper if necessary)

May we call you if the applicant is a finalist? _____

Signature of Counselor _____

School _____

Address _____

THIS SHEET MUST ACCOMPANY THE APPLICATION

AFT MICHIGAN, AFT • AFL-CIO

**AFT MICHIGAN MEMBER'S GRADUATING HIGH SCHOOL SENIOR
SCHOLARSHIP APPLICATION**

TEACHER'S REFERENCE & RATING

NAME OF SCHOLARSHIP APPLICANT

TEACHER'S NAME

WORK PHONE

HOME PHONE

The person named above has applied for a scholarship through a program of the AFT Michigan. This person is requesting that you provide us with a reference to be used in processing this application.

We must receive your reference by June 7, 2019 in order for it to be valid. Please make note of the deadline.

PLEASE RANK THE APPLICANT'S SKILLS IN THE FOLLOWING AREAS BASED ON A "1" TO "5" SCALE.
1 = LOWEST - 5 = HIGHEST

	LOWEST			HIGHEST	
LEADERSHIP QUALITIES	1	2	3	4	5
SELF CONFIDENCE	1	2	3	4	5
RELIABILITY	1	2	3	4	5
SOCIAL SKILLS and RELATIONSHIPS WITH PEERS	1	2	3	4	5
INTEGRITY	1	2	3	4	5
MATURITY FOR AGE	1	2	3	4	5

Please provide us with a few sentences, which would describe the applicant. (Use a separate sheet of paper if necessary)

May we call you if the applicant is a finalist? _____

Signature of Teacher _____

School _____

Address _____

THIS SHEET MUST ACCOMPANY THE APPLICATION

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SCHOLARSHIP APPLICATION**

APPLICANT INFORMATION & ESSAY QUESTIONS

Please list any other scholarships, grants and/or loans you are seeking or have been awarded.

Please include with your application an essay, not less than 500 words (type or print) on a separate sheet of paper, answering the following questions.

1. Why do you want to become a teacher?
2. Why should you be considered for this scholarship?
3. Is there a correlation between education and politics?

All information on this application is true and complete to the best of my knowledge and ability.

Applicant's Signature

Date

We must receive your references by June 7, 2019 in order for it to be valid.