

Applicant's Name _____

TORRANCE TEACHERS ASSOCIATION

SCHOLARSHIP

INSTRUCTIONS:

1. Please type or use ink. Answer all questions and complete all blanks.
2. Use N/A (not applicable) for questions that do not apply.
3. Applicant must be a dependent child of an active TTA member who will attend or is attending college and is claimed as a dependent on the member's current IRS tax returns (2011). No individual shall be awarded this scholarship more than twice.
4. Incomplete applications or applications received after the deadline will not be considered.
5. Deadline for returning applications to the TTA Office is 5:00 pm, Thurs., April 5, 2012.

THE APPLICANT IS RESPONSIBLE FOR THE FOLLOWING:

Check When Completed:

- _____ 1. TTA Member Data (page 2)
- _____ 2. Application Form (page 3): **Please Note - for high school grade point average please use Cumulative GPA (weighted)**
- _____ 3. School and Community Activity Record (pages 4 & 5)
- _____ 4. Applicant's Statement (page 6)
- _____ 5. High school seniors must submit two (2) Letters of Recommendation:
 - a. One (1) from a certificated school employee - teacher, counselor, administrator, etc. (page 7), and
 - b. One (1) from a community member who knows the applicant primarily outside of the school setting (page 8)

College students must submit only one (1) Letter of Recommendation from either a certificated school employee (see a. above) or from a community member (see b. above).
- _____ 6. Current High School(s) and/or College (s) Transcripts must accompany this application. Transcripts from the last two years are considered current.
- _____ 7. Make sure that all forms are complete.

Return to TTA Office no later than 5:00 PM, Thursday, April 5, 2012.

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TORRANCE TEACHERS ASSOCIATION

SCHOLARSHIP

TTA MEMBER DATA

TTA MEMBER'S NAME _____

HOME ADDRESS _____

Street

City

Zip Code

HOME TELEPHONE _____

SCHOOL _____

RELATIONSHIP TO APPLICANT _____

List any participation in Association activities, such as TTA Board of Directors, TTA Rep Council, TTA Committees, etc.

Applicant's Name _____

TORRANCE TEACHERS ASSOCIATION SCHOLARSHIP

APPLICATION FORM

NAME _____

MALE _____ FEMALE _____ AGE _____ PHONE NUMBER () _____

PERMANENT ADDRESS _____

Street City State Zip

LOCAL ADDRESS _____

Street City State Zip

High School/Colleges Attended Dates of Attendance Grade Point Average

1. I am a high school student presently attending: _____
I plan to attend (name/location of college): _____
2. I am a college student presently attending: _____
Number of college units completed: _____

DESCRIBE YOUR CAREER PLANS/COURSE OF STUDY:

NAMES OF PARENTS THEIR PLACE OF EMPLOYMENT JOB TITLE

Number of dependents in your home: (include yourself, but not your parents) _____

Ages of brothers and sisters: _____ Number in college: _____

I HEREBY AFFIRM that I intend to be enrolled in an accredited school of higher education and that I propose to use this scholarship for that purpose. I understand that no funds shall be released to me until I provide TTA with proof of enrollment from the college or university. I understand that enrollment must be completed within the current calendar year.

Date _____ Signature _____

Applicant's Name _____

TORRANCE TEACHERS ASSOCIATION SCHOLARSHIP

SCHOOL/COMMUNITY ACTIVITY RECORD

Please complete pages 4 and 5 with information regarding your participation in school and community activities. **Type or print clearly or attach computer print out using this format. Attach an additional sheet if necessary.**

A. ACTIVITY RECORD -- SCHOOL

Place an "X" in grade column for year of participation. Specify any offices held.

School Organizations/Activities/Sports 9 10 11 12 College

Awards/Honors/Achievements 9 10 11 12 College

Applicant's Name _____

TORRANCE TEACHERS ASSOCIATION SCHOLARSHIP

APPLICANT'S STATEMENT

State in 200 words or less why you feel you should be considered for a TTA Scholarship. **Use this page or attach a computer print out. Double space preferred.**

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TORRANCE TEACHERS ASSOCIATION SCHOLARSHIP

Letter of Recommendation #1 - Certificated School Employee
(Teacher, Counselor, Administrator, etc.)

Directions: Please type on this page or attach a computer print out of the recommendation. Include specific examples which demonstrate the following criteria:
1) academic and vocational potential; 2) character traits such as responsibility, reliability, and integrity;
3) involvement in school and community activities; and 4) honors/awards/special achievements. Add any other items that may be of interest to the Scholarship Committee.

Signature _____ **Position** _____

Printed Name _____ **School** _____

Number of years you have known applicant _____ **Date** _____

Applicant's Name _____

TORRANCE TEACHERS ASSOCIATION SCHOLARSHIP

Letter of Recommendation #2 - Community Member

(Someone who knows the applicant primarily outside of the school setting)

Directions: Please type on this page or attach a computer print out of the recommendation. Include specific examples which demonstrate the following criteria:

1) academic and vocational potential; 2) character traits such as responsibility, reliability, and integrity; 3) involvement in school and community activities; and 4) honors/awards/special achievements. Add any other items that may be of interest to the Scholarship Committee.

Signature _____ **Company/Organization** _____

Printed Name _____ **Title** _____

Number of years you have known applicant _____ **Date** _____

