

**Eligibility**

**Duval County Council of PTAs/PTSAs 2018-19**

**Scholarship Application Information**

To be eligible for this scholarship, an applicant must:

1) be a 2019 graduating senior of a Duval County high school;

2) be a member of your school’s PTA/PTSA or the Sunshine State PTSA; Note: The PTA/PTSA must be in good standing. If your school does not have a PTSA, you may join the Sunshine State PTA at <http://floridapta.org/join-connect> or email info@floridapta.org .

3) have an unweighted cumulative high school grade point average of 3.0 or higher for University and Fine Arts, 2.5 or higher for Community College, and 2.0 or higher for Vo-Tech or Adversity/Opportunity.

4) submit completed application form, including reference letters and Official Student Academic History sheet with Guidance Office stamp, to the DCCPTA, Attention Scholarship Committee, postmarked no later than March 31, 2019.

5) enroll as a full-time undergraduate student in any accredited postsecondary institution for the 2019-2020 year. For a list of accredited institutions, please visit http://ope.ed.gov/accreditation.

6) proof of registration and Social Security Number are required upon award of this scholarship.

**Value of Scholarship**

This is a one-time $500 scholarship, which will be sent directly to the school of your choice.

**Steps in Applying**

1) Type or print answers on the application. PLEASE PRINT LEGIBLY. Be sure to answer all questions.

2) Enclose the following items in a large manila envelope:

A. Completed two-page scholarship application;

B. Official high school Student Academic History sheet (in a separate sealed envelope);

C. Essay including your name at the top of both pages. On one (1) page of 8 ½ x 11” paper using 12 pt. Arial or Times Roman font, ***discuss an experience you have had in any area of your life: school, work, athletics, family, church, community and how that experience will help you achieve your future educational goals***. On an additional page of 8 ½ x 11” paper using 12 pt. Arial or Times Roman font describe ***what PTA/PTSA means to you and your PTA/PTSA participation***. Be sure to include any extenuating circumstances which may explain your situation.

D. Two (2) letters of reference (one from school and one from community)

Mail the application packet to DCCPTA, PO Box 5397, Jacksonville, FL 32247, ATTENTION: SCHOLARSHIP COMMITTEE postmarked no later than March 31, 2019.

**Date of Notification**

The scholarship recipients will be notified by US mail and/or email 1 May 2019, and those receiving scholarships will be awarded at the 14 May 2019 Principals and PTA Presidents Luncheon.

**Scoring rubric**

Each scholarship application will be screened on academic achievement (30%), service leadership in

the school and community (30%), essay on educational goals (30%), and the impact of PTA/PTSA on the applicant (10%).

**2018-19 Duval County Council of PTAs/PTSAs Scholarship Application**

**Type of Scholarship Applied for: If applying for scholarships in multiple categories, each application must be clearly marked and separated within the same envelope. Applicants may not win in more than one category.**

**University & Fine Arts\_\_\_\_\_ Community College\_\_\_\_\_**

**Vocational/Technical\_\_\_\_\_ Adversity/Opportunity\_\_\_\_\_**

Student Name:

Last First Middle

Mailing Address:

Street City Zip

Parent/Guardian Name(s): Email Address:

|  |  |
| --- | --- |
| Preferred Phone:  | Alternate Phone:  |
| Name of School:  | Graduation Date:  |
| Guidance Counselor:  | Telephone:  |

PTA/PTSA unit name: Membership Card #:

**Academic achievement (30%)**

Grade Point Average cumulative unweighted: on a 4.0 scale

SAT (verbal/nonverbal only) Score:

ACT (reading/math only) Score: \_

School You Plan to Attend: Field of Study:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Service leadership in the school and community (30%)**Please list actual services you have performed along with the organization name. No abbreviations please. | 9 | 10 | 11 | 12 | TotalHours |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

2019 DCCPTA Scholarship Application Page 2 Student Name:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Recognition or Award** | **9** | **10** | **11** | **12** | **Group or Activity**No abbreviations please. |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Paid Employment** | **9** | **10** | **11** | **12** | **Hours/week** | **Company Name & Address** No abbreviations please. |
| Position |  |  |  |  |  |  |
| Position |  |  |  |  |  |  |

**Essay on educational goals (30%)**

On one (1) page of 8 ½ x 11” paper using 12 pt. Arial or Times Roman font, ***discuss an experience you have had in any area of your life: school, work, athletics, family, church, community and how that experience will help you achieve your future educational goals***. Be sure to include any extenuating circumstances which might contribute to your consideration.

**Impact of PTA/PTSA on the applicant (10%)**

On an additional page of 8 ½ x 11” paper using 12 pt. Arial or Times Roman font describe ***what***

***PTA/PTSA means to you and your PTA/PTSA participation***.

Mail the application packet to DCCPTA, PO Box 5397, Jacksonville, FL 32247, ATTENTION: SCHOLARSHIP COMMITTEE postmarked no later than March 31, 2019.

Remember to enclose all of the following items in the same large envelope: A. Completed two-page scholarship application;

B. Official high school Student Academic History sheet with Guidance Office stamp (in a separate sealed envelope);

C. Essay – please include your name at the top of both pages. On one (1) page of 8 ½ x 11” paper using 12 pt. Arial or Times Roman font, ***discuss an experience you have had in any area of your life: school, work, athletics, family, church, community and how that experience will help you achieve your future educational goals***. On an additional page of 8 ½ x 11” paper using 12 pt. Arial or Times Roman font describe ***what PTA/PTSA means to you and your PTA/PTSA participation***. Be sure to include any hardship or extenuating circumstances which might contribute to your consideration.

**D. Adversity/Opportunity.** On one (1) page of 8 ½ x 11” paper using 12 pt. Arial or Times Roman font**, *describe your extenuating hardship situation that you are working to overcome*.**

E. Two (2) letters of reference (one from school and one from community)