SCHOLARSHIP AWARD MICHAEL HINDMAN TEACHER EDUCATION SCHOLARSHIP

This scholarship fund was established in honor of Mr. Hindman, who was an Illinois Education Association UniServ Director for over 25 years. He dedicated his life to the betterment of education and teachers in our area. A yearly scholarship is awarded to a student who plans to pursue a career in education. This year one \$1,000 scholarship will be awarded in the spring and paid when the student begins his/her student teaching assignment (within 3 to 6 years).

Criteria:

- ♦ Application is open to any high school senior residing in IEA-NEA Region 3 or 7 who is entering college with plans to pursue a career in education.
- ♦ Applicant must be a U.S. citizen.
- Applicant must have been accepted at a college.
- Applicant must have demonstrated success in his/her high school career.

Instructions for Application:

- Application must be typed or hand-printed legibly.
- ♦ Complete each section of the application.
- ♦ Limit answers to space available.
- ♦ One letter of recommendation supporting your application is required. This must be from someone other than a relative.
- ♦ Attach a high school transcript to the application.
- ♦ Include a copy of ACT and/or SAT scores.
- ♦ Application must be postmarked by March 1, 2022.
- ♦ Send completed application to:

Attn: Michael Hindman Scholarship IEA-NEA 104 Greenview Dr Effingham, IL 62401

MICHAEL HINDMAN TEACHER EDUCATION SCHOLARSHIP APPLICATION FORM

(Must be typed or hand-printed legibly)

| Student's Name | | | | |
|--|----------------------|---------------|--------|-----|
| Home Address Street | | City | State | Zip |
| Phone_() | Email_ | | | |
| Parents' Name(s) | | | | |
| Parents' Occupation(s) | | | | |
| Are you a U.S. Citizen? | Yes | No | | |
| College or University you pla | an to attend | | | |
| College or University Addres | ss | | | |
| Have you been accepted? | | | | |
| High school currently attend | ling | | | |
| Please list your involvement (school, community and chu | | ons and activ | ities: | |
| Organization | Year(s) (From-To) | | | ty |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Please list any awards or ho | nors you have | received: | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

| Employment History: (List most recent first) | Place | From/To | Position |
|---|----------------|------------------------|----------------------|
| | | | |
| Explain your financial n | need: | | |
| | | | |
| List any other scholars | hips for which | you have applied: | |
| | | | |
| Total \$ amount of scho | larships/award | ls you have received_ | |
| After completing your o | degree, where | do you plan to begin y | our teaching career? |
| List two references, oth academic and personal | | members, who are fa | miliar with your |
| Name | | Name | |
| Address | | _Address | |
| Phone | | Phone | |

- Attach an essay of two hundred words or less on the following topic: "My Educational and Professional Goals" (MUST BE TYPED)
- Attach another essay of two hundred words or less on the topic: "Why I want to be a Teacher" (MUST BE TYPED)
- Also attach a high school transcript, a copy of your ACT and/or SAT scores, and a letter of recommendation from a non-family member.
- By submitting this application I agree to provide the scholarship committee with information concerning my student teaching experience, should I receive the scholarship.

If you have any questions, please call the Illinois Education Association-NEA at 217-342-2187.