

**WV ASSOCIATION OF RETIRED SCHOOL EMPLOYEES  
Student Teacher Scholarship Application**

**Section I** Personal Information

Name \_\_\_\_\_ email address \_\_\_\_\_ Sex: M \_\_\_ F \_\_\_ Age \_\_\_\_\_

Campus \_\_\_\_\_

Address \_\_\_\_\_

Home \_\_\_\_\_

Address \_\_\_\_\_

cities/towns/zip codes and phone #'s \_\_\_\_\_

Graduate of \_\_\_\_\_ High School in \_\_\_\_\_ County \_\_\_\_\_ Year \_\_\_\_\_

Marital Status: Single \_\_\_ Married \_\_\_ Spouse's Name \_\_\_\_\_ Children: ( ages ) \_\_\_\_\_

Parents (Mother) \_\_\_\_\_ (Father) \_\_\_\_\_

List on separate page(s) Talents, Experiences, and Special Honors you have received and include these with the application. Limit page size to 8 1/2 x 11

**Section III Present Status**

Enrolled in \_\_\_\_\_ College/University

Student Teaching is Scheduled from \_\_\_\_\_ To \_\_\_\_\_ Supervising Teacher \_\_\_\_\_

Grade Level and Subjects Assigned \_\_\_\_\_

School and County Assigned \_\_\_\_\_ Fields of Certification \_\_\_\_\_

**Section IV Future Teaching Plans**

Do you plan to teach in WV? Yes \_\_\_\_\_ No \_\_\_\_\_ Preferred County \_\_\_\_\_

Preferred Level Elementary \_\_\_ Middle School \_\_\_ High School \_\_\_ Subject Area(s) \_\_\_\_\_

**Section V Teacher Education Director or Designee Endorsement**

\_\_\_\_\_ is recommended by the teacher education staff of \_\_\_\_\_  
College/University for consideration for a WVARSE Scholarship.

Comments: (probable success, dedication, special traits, financial needs, etc.) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature \_\_\_\_\_ Position \_\_\_\_\_ Date \_\_\_\_\_

**Also submit at least one letter of recommendation from another teacher or professor.**

**Section VI Autobiography, Photograph, and Transcript**

Submit an autobiography (2 -3 pages) with the application. Limit page size to 8 1/2 x 11 and printed on front side only.  
Please attach the photograph to the front of the application. This must be a true photograph because scanned ones do not copy well.  
Attach most current transcript to application.

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

**Mail completed application to:**

**Sharon O'Dell Vance, Scholarship Chairperson, 3311 Vago Road, Frankford, WV 24938**

**APPLICATION MUST BE POSTMARKED NO LATER THAN DECEMBER 14, 2019**