

# 2019 EDUCATOR'S SCHOLARSHIP APPLICATION

This application must be postmarked by **April 30, 2019**.



Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Preferred Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name of MACSA Member School \_\_\_\_\_

Marital Status \_\_\_\_\_ Number of dependents including self \_\_\_\_\_

➤ Are there school or other funds available to you for taking graduate work? \_\_\_\_\_

If so, how much? \_\_\_\_\_

Briefly explain: \_\_\_\_\_

\_\_\_\_\_

## EDUCATIONAL BACKGROUND

College or University \_\_\_\_\_ Graduation Date \_\_\_\_\_ Degree \_\_\_\_\_ Area of Concentration \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How many hours of course work (beyond bachelor's) in education have you completed? \_\_\_\_\_

➤ List the courses you expect to take:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you hold a current certification? (Yes or No) \_\_\_\_\_

Elementary \_\_\_\_\_ Secondary \_\_\_\_\_ In which state (or organization)? \_\_\_\_\_



What is your present position? \_\_\_\_\_

**EXPERIENCE**

➤ List the schools in which you have taught in chronological order.

<u>Name of School</u>	<u>Location</u>	<u>Dates</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Statement of Purpose:** On a separate sheet of paper, write a brief statement regarding your purpose for such study, including the following:

1. Your intent with respect to your future in Christian Education.
2. How the courses you intend to take will enhance your school and Christian Education in general.

Print Name: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

In order to be considered for a scholarship award, the applicant must:

- Fully complete, sign, and date the application.
- Be employed with a MACSA member school.

**IMPORTANT:** This application must be postmarked **BEFORE April 30, 2019** and mailed to:

**MACSA • c/o Scholarship Committee • PO Box 29712 • Elkins Park, PA 19027**

Mid-Atlantic Christian Schools Association, PO Box 29712 • Elkins Park, PA 19027  
267-323-0222 (voice) [www.macsaonline.org](http://www.macsaonline.org)

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