Licking County Retired Teachers Association
Application for Student Teacher Grant

Name_____ **Phone**_____

Address_____

Email address_____ **Cumulative GPA** _____

ACADEMIC HONORS List any scholastic distinctions or honors you have received.

LIST ACTIVITIES in school, the community, and your church, detailing work with children.

On a separate sheet of paper answer the following questions:

1. Express your reason for choosing the teaching profession as a career.
2. How will this grant be helpful to you?

*I hereby agree that the above statements are correct and true.

Applicant's signature_____ Date_____

*Please return this application along with two letters of recommendation from persons who have witnessed applicant's work with children (one from OSUN faculty and one from an off-campus educator). Submit postmarked application to Mary Ellinger by March 15, 2018.

Mary Ellinger, LCRTA Scholarship/Grant Chair

119 Brentwood Dr. NE

Newark, OH 43055

For more information contact Mary at mtellinger@roadrunner.com