

Scholarship Application Page 1



- Scholarships are available to eligible applicants on a first come, first served basis as long as funding is available.
- Please fill in ALL questions. Incomplete application packets cannot be processed.
- You MUST provide verification of income. A statement from your employer indicating your hours and rate of pay or a recent pay stub may be used for verification.
- Please keep a copy of all items sent for your records.
- If you are accepted, you will receive a contract (Form A) in the mail. You do not have a scholarship until Form A is signed, returned and received by T.E.A.C.H. MISSOURI staff.

Date: _____

Personal Information

First Name	Middle Name	Last Name	
Phone	<input type="checkbox"/> Mobile <input type="checkbox"/> Home	Email	
Address		City	
State	Zip +4	County	
SSN	Date of Birth	Gender <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Other	
Do you consider yourself...?			
<input type="checkbox"/> White <input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American <input type="checkbox"/> Native Hawaiian/Other Pacific Islander <input type="checkbox"/> Other race			
Are you of Hispanic, Latino, or Spanish origin?			
<input type="checkbox"/> No <input type="checkbox"/> Yes, Puerto Rican <input type="checkbox"/> Yes, another Hispanic, Latino, or Spanish origin <input type="checkbox"/> Yes, Mexican, Mexican American, Chicano <input type="checkbox"/> Yes, Cuban			
How did you hear about T.E.A.C.H. MISSOURI?			
<input type="checkbox"/> Presentation <input type="checkbox"/> College <input type="checkbox"/> Workshop <input type="checkbox"/> Mailing <input type="checkbox"/> Center Director <input type="checkbox"/> Website <input type="checkbox"/> CC R&R Agency <input type="checkbox"/> T.E.A.C.H. Recipient <input type="checkbox"/> Other			

Employment Information

Employer	Center Lic #
What is your job title?	<input type="checkbox"/> Teacher <input type="checkbox"/> Assistant Teacher <input type="checkbox"/> Owner/Director <input type="checkbox"/> Director <input type="checkbox"/> Assistant Director <input type="checkbox"/> Owner/Teacher <input type="checkbox"/> Other
Beginning date of employment at program	Current hourly wage
Hours per week	Months per year
Number of children in your care	How long have you worked in the field of early childhood?
What age groups do you teach? (Check all that apply.)	<input type="checkbox"/> Less than 2 Yrs <input type="checkbox"/> 6-10 Yrs <input type="checkbox"/> 2-5 Yrs <input type="checkbox"/> 10+ Yrs <input type="checkbox"/> 0 <input type="checkbox"/> 2 <input type="checkbox"/> 4 <input type="checkbox"/> Pre K <input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 5 <input type="checkbox"/> School Age

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Education Information

Which college in Missouri do you want to attend?

Are you currently enrolled in courses? Yes No

When would you like to begin your T.E.A.C.H. MISSOURI Scholarship? Spring (January start) Summer (June start) Fall (August start) Year

Please check the box that best describes your educational history.

No High School Diploma 1-Year Certificate Bachelor Degree in Early Childhood
 High School Diploma/GED Associate Degree in Early Childhood Bachelor Degree in other field
 High School Diploma/GED + Credit Associate Degree in other field Masters
Hours Doctorate

Please check one that best describes your educational goals.

Earn an EC Credential Take a few early childhood courses to obtain or upgrade job-related skills
 Earn an EC Certificate Earn an EC Associate Degree and transfer to a four-year college to earn a Bachelor's Degree
 Earn an EC Associate Degree
 Earn an EC Bachelor's Degree

How will a T.E.A.C.H. MISSOURI Scholarship help you achieve this goal?

Are you...? Single, no kids Single parent, grandparent or guardian
 Married, no kids Married parent, grandparent or guardian

What is the number living in your household?

Which languages can you speak fluently?

Which language do you feel most comfortable using when learning in a classroom?

Albanian English Mandarin Vietnamese
 American Sign Lang. French Russian Don't Know
 Bengali Italian Spanish Other
 Cantonese German

Have you taken any college courses in the past two years? Yes No

Have you completed any ECE credits in the past two years? Yes (How many? _____) No

Do you have parents or siblings that have *attended* college? Yes No

Do you have parents or siblings that have a college degree? Yes No

Which of the following credentials and specializations do you currently hold?

CDA: Infant/Toddler Specialization: Bi-Lingual
 CDA: Preschool Missouri Issued Credential
 CDA: Family Child Care Home State Teaching License
 CDA: Home Visitor None

1000 Executive Parkway Dr., Ste. 103 | St. Louis, MO 63141

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www.teach-missouri.org

Updated March 2016

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Have you applied for other financial aid? Yes Sources of other aid: PELL Grant Missouri Access Grant
 No Other Student loans

Receiving other financial aid does not disqualify you from the T.E.A.C.H. MISSOURI Scholarship. In fact, recipients are required to apply for financial aid using the FAFSA.

Does your center reimburse for tuition? Yes No

Does your center reimburse for books? Yes No

Will your portion of *tuition* be covered by your center or a third party? Yes No

Will your portion of *books* be covered by your center or a third party? Yes No

MOPD ID If you do not have a MOPD ID, please visit www.openinitiative.org, Missouri's Professional Development Initiative for Early Childhood and Afterschool Professionals.

Statement and Signature of Applicant

I attest that I am requesting financial support for my college courses and all information provided is true and accurate. I understand that eligibility does not guarantee that I will receive a scholarship award. Furthermore, I understand that if I receive a scholarship and do not complete the contract in full, I will be responsible for repayment of all expenses incurred by T.E.A.C.H. MISSOURI.

Signature of Applicant

Date

This application must be accompanied by a recent paystub and a Center Participation Agreement. If a current Program Information Form is not on file, please also send one so program information can be updated. Applications will not be considered without all required documentation.

Return your completed application packet:

By Fax:
866-697-8168

or

By Mail:
T.E.A.C.H. MISSOURI
1000 Executive Parkway Dr., Ste 103
St. Louis, MO 63141