

## **Apprentice Teaching Scholarship**

FSU-Teach Apprentice Teaching scholarships are designed to ease some of the financial burdens of student teaching, such as gas for commuting to school and clothes that are appropriate for teaching.

### **Eligibility:**

- Students must be in or about to enter their Apprentice Teaching semester
- Financial need. (*primary factor*)

### **Requirements (ALL of the following):**

1. Scholarship recipients are required to write a thank you note to the donor.
2. Written update by the recipient of degree completion plans and progress toward such completion.

### **Award:**

- The Apprentice Teaching Scholarship award is \$2000.00.

## FSU-Teach Apprentice Teaching Scholarship

**Due Date: Return to FSU-Teach Office (209 MCH) by the second Friday of classes each semester**

**Please type or print legibly**

Name		Email	Date
Local Address		Zip	Phone ( )
Permanent Address		Zip	Phone ( )

Semester of Apprentice Teaching? \_\_\_\_\_

Date of Graduation? \_\_\_\_\_

**EDUCATION**

Please provide an **unofficial** FSU transcript.

Major	GPA in your major
Cumulative FSU GPA:	

**WORK EXPERIENCE**

Employer	Duties	Dates

**ACTIVITIES WHILE IN COLLEGE**

Community Involvement

Extracurricular Activities

**ESSAY:** In an essay of 200 to 300 words please describe your goals for the future. Explain the circumstances and experiences that have contributed to how you plan to achieve those goals. Attach on separate sheet.

### FINANCIAL INFORMATION

Please complete to the best of your knowledge. Financial need will be verified through FSU Financial Aid.

Name	Campus ID
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Estimated Income for the Upcoming Semester		Estimated Expenses for the Upcoming Semester	
Savings	\$	Tuition and Fees	\$
Loans (Itemize below)	\$	Books and Supplies	\$
Employment	\$	Housing	\$
Parental Support	\$	Food	\$
Spouse/Family Support	\$	Utilities	\$
Social Security	\$	Personal Care	\$
Scholarships (Specify)	\$	Transportation	\$
Total Income	\$	Total Expenses	\$

Please explain any unusual expenses.	
Please provide any additional information pertinent to making an assessment of your financial need.	
Are you currently employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	Where are you employed?
How many hours per week?	What type of position is this job?

### AUTHORIZATION TO RELEASE INFORMATION

Student Name (type or print): \_\_\_\_\_ Campus ID \_\_\_\_\_

The Family Educational Rights and Privacy Act (FERPA) of 1974, also called the Buckley Amendment, applies to any institution of higher education receiving federal aid. This act contains detailed requirements regarding the maintenance and disclosure of student records. Records protected by this regulation cannot be provided to parents, legal guardians or others unless students so authorize.

As a student at The Florida State University, I hereby give The Florida State University permission to release and/or discuss privileged information related to my status and relationship with the university to The FSU-Teach Student Scholarship Program for the purpose of determining my qualifications and eligibility to receive The FSU-Teach Student Scholarship.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date