



**FSU-Teach**  
**Robert Noyce Teaching for Equity Scholarship Program**  
**Applicant Form**

**Personal Information**

Last Name	First Name	Middle initial
Local Address	Permanent Address (if different)	
City	City	
State	Zip Code	State      Zip Code
Home Phone	Cell Phone	
Primary email	Alternate email	
Date of Birth	Gender	
	Country of Birth	

Citizenship (check one) <input type="checkbox"/> US Citizen <input type="checkbox"/> US National <input type="checkbox"/> US Permanent Resident Alien	Ethnicity (check one) <table border="0" style="width: 100%;"> <tr> <td style="width: 50%; padding: 2px;"><input type="checkbox"/> African American</td> <td style="width: 50%; padding: 2px;"><input type="checkbox"/> Hispanic</td> </tr> <tr> <td style="padding: 2px;"><input type="checkbox"/> Asian</td> <td style="padding: 2px;"><input type="checkbox"/> Native American</td> </tr> <tr> <td style="padding: 2px;"><input type="checkbox"/> Caucasian</td> <td style="padding: 2px;"><input type="checkbox"/> Other (specify) _____</td> </tr> </table>	<input type="checkbox"/> African American	<input type="checkbox"/> Hispanic	<input type="checkbox"/> Asian	<input type="checkbox"/> Native American	<input type="checkbox"/> Caucasian	<input type="checkbox"/> Other (specify) _____
<input type="checkbox"/> African American	<input type="checkbox"/> Hispanic						
<input type="checkbox"/> Asian	<input type="checkbox"/> Native American						
<input type="checkbox"/> Caucasian	<input type="checkbox"/> Other (specify) _____						

**Academic Information**

Current Class Level (check one) <input type="checkbox"/> Junior <input type="checkbox"/> Senior	Target certification field (check one) <input type="checkbox"/> Biology <input type="checkbox"/> Mathematics <input type="checkbox"/> Chemistry <input type="checkbox"/> Geosciences <input type="checkbox"/> Physics
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\_\_\_\_\_  
 Expected graduation date

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## ***Community Involvement***

List community involvement activities in which you have participated as a volunteer during the last 2 years, beginning with the most recent. If it is not possible to obtain the sponsor's signature, please provide a brief reason. You may make additional copies of this page if you need more spaces.

Name of Organization \_\_\_\_\_

Brief description of community service activity \_\_\_\_\_

\_\_\_\_\_

Start & end dates \_\_\_\_\_ Total hours or hours/week \_\_\_\_\_

Signature of sponsor or advisor \_\_\_\_\_

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Name of Organization \_\_\_\_\_

Brief description of community service activity \_\_\_\_\_

\_\_\_\_\_

Start & end dates \_\_\_\_\_ Total hours or hours/week \_\_\_\_\_

Signature of sponsor or advisor \_\_\_\_\_

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Name of Organization \_\_\_\_\_

Brief description of community service activity \_\_\_\_\_

\_\_\_\_\_

Start & end dates \_\_\_\_\_ Total hours or hours/week \_\_\_\_\_

Signature of sponsor or advisor \_\_\_\_\_

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***Essay***

The FSU-Teach Noyce phase II program focuses on preparing and supporting equitable teaching in Mathematics and Science classrooms. Describe how we can meet the needs of diverse populations of students in the 21<sup>st</sup> century? Please limit your response to 400-600 words.

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## ***Applicant Certification and Release of Information***

Please read and **initial** that you understand and agree to each of the following statements.

- \_\_\_\_\_ I certify that all of the information on this application is true and complete to the best of my knowledge.
- \_\_\_\_\_ I certify that I meet and will maintain all of the eligibility requirements (including maintaining a 2.5 or higher cumulative GPA and full time student status continuously at FSU for the term of my scholarship/ stipend).
- \_\_\_\_\_ I understand that I must complete a major in a science or mathematics field and complete teacher certification requirements for that field.
- \_\_\_\_\_ I will apply to FSU's Teacher Education Unit if not done so already.
- \_\_\_\_\_ I have passed all criminal background checks, which are conditions for employment in Florida public schools.
- \_\_\_\_\_ I understand that I am **obligated** to teach full time as a certified teacher in mathematics or science in a high-need public school district for **two years for every year of scholarship** or stipend support received and that this commitment must be completed within 6 years of graduation. ***If I fail to complete the teaching obligation as specified, I must immediately repay the total balance of all scholarships/ stipends received.***
- \_\_\_\_\_ I understand that I will be required to attend monthly meetings and participate in field experiences related to Noyce program. I also understand that failure to meet the required points for each semester may result in not receiving further installments from the Noyce scholarship program.
- \_\_\_\_\_ I authorize exchange or disclosure of information among FSU and school districts and other entities relating to teaching or working with children and/or participating or cooperating in teacher certification programs as such information related to my application, suitability for internship, employment, admission, status, good standing or continuation as an applicant, university student, or school employee before or after acceptance in any of those capacities.
- \_\_\_\_\_ I understand that by applying for the Noyce Scholarship I am also being invited to be in a research study of "Preparing and Supporting Equitable Teaching in Mathematics and Science Classrooms: The FSU-Teach Noyce Program" but that this participation is voluntary and confidential, and I may elect not to participate or to withdraw from the study at any time. I understand that initialing this statement does not indicate my voluntary consent, but that I will receive more information upon which to base my decision to participate.
- | \_\_\_\_\_ I understand that I will be required to participate in induction support from both FSU-Teach and Noyce and provide teacher work samples for the FSU-Teach program.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant Name (printed or typed)