CRITERIA AND GENERAL INFORMATION

The purpose of this scholarship award is to honor high school seniors from the Gwinnett County Public School System and/or City of Buford who are planning to enter teaching as a career. Academic ability and financial need will be reviewed, but the overriding criteria will be the applicant’s sincere intention of becoming a teacher.

1. The scholarship award is $1,500.00.

2. Only students who plan to attend an accredited college or university and major in the field of education are eligible to apply for this scholarship.

3. The scholarship will be paid directly to the respective college or university before the fall quarter or semester begins and in compliance with the institution’s payment requirements or funds can be paid directly to the scholarship winner if preferred.

4. Application must be submitted by March 1, 2024.

Contact: Dr. Janice L. Calkins, HS Scholarship Committee Chair
Jcalk52@gmail.com or call 404-731-5105

5. Recipients will be notified on or before March 29, 2024.

6. Formal confirmation of the scholarship award will be made at the Gwinnett County Retired Educators Association luncheon meeting, April 12, 2024, at the TPC Sugarloaf Country Club, arrive by 10:00, lunch at 11:00. Conferring of scholarship awards will be before lunch. Winner can invite 1 guest to ceremony & luncheon, both will be paid for by GCREA.

7. Application Requirements:

   A. Two letters of recommendation must accompany the application. One must be from a school official (administrators, teachers, or counselors) and the other from a person not associated with your school (i.e., church, community, club, etc.) Please do not include letters from family or adolescent friends.

   B. A copy of the applicant's transcript, showing SAT/ACT Scores and high school cumulative Grade Average, must accompany application.

   C. The application must be typed or printed in blue or black ink.

   D. Incomplete applications will not be considered.
NAME _______________________________________________________________
ADDRESS _____________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
TELEPHONE_______________   HIGH SCHOOL_______________________
YOU LIVE WITH BOTH PARENTS ____    MOTHER ONLY  ____   FATHER ONLY  ____   OTHER  ____
OCCUPATION OF FATHER ______________  MOTHER ________________  OTHER ____________
NAME OF BROTHER(S)/SISTER(S)               GRADE LEVEL      AGE        SCHOOL
_________________________________                     ______               ___          _______________________
__________________________                _____           ___       __________________
__________________________                _____           ___       __________________

TOTAL FAMILY INCOME (before taxes last year): circle one
under $15,000    $15,000-30,000    $30,000-50,000    $50,000 -70,000    $70,000-100,000   over $100,000

NAME AND COMPLETE ADDRESS OF COLLEGE/UNIVERSITY YOU PLAN TO ATTEND
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________
City                                                     State                                           Zip
HAVE YOU APPLIED YES _____  NO _____  HAVE YOU BEEN ACCEPTED       YES ____   NO  ____
ARE YOU EXPECTING ANY OTHER FINANCIAL AID OR SCHOLARSHIPS?      YES    _____  NO  _____
IF YES, EXPLAIN   ____________________________________________________________________
_________________________________________________________________________________________
__________________________________________________________________
ARE YOU PLANNING TO WORK WHILE ATTENDING COLLEGE?       YES   _____          NO _____

2 of 3
GWINNETT COUNTY RETIRED EDUCATORS ASSOCIATION
SCHOLARSHIP APPLICATION (cont.)

USING AS MANY ADDITIONAL SHEETS AS NECESSARY, COMPLETE THE APPLICATION AS
FOLLOWS:

I   GIVE INFORMATION ON EACH OF THE TOPICS LISTED BELOW:

- EXTRA CURRICULAR ACTIVITIES (school clubs, class offices, organized sports, etc.)
- HONORS / AWARDS / ACHIEVEMENTS
- SPECIAL TALENTS / HOBBIES
- CHURCH / COMMUNITY ACTIVITIES
- WORK EXPERIENCE, IF ANY

II    WRITE ONE OR TWO SHORT PARAGRAPHS EXPLAINING YOUR REASONS FOR PURSUING A CAREER
IN THE FIELD OF EDUCATION AND THE AREA YOU PLAN TO STUDY? (BE AS SPECIFIC AS POSSIBLE.)

III   (Optional)  ARE THERE ANY SPECIAL FAMILY CIRCUMSTANCES OR NEEDS YOU FEEL YOU WANT TO
COMMUNICATE TO THE SCHOLARSHIP COMMITTEE?  IF YES, EXPLAIN.  REASONS WILL REMAIN
CONFIDENTIAL.

APPLICANT’S SIGNATURE    __________________________________________________________

CAREFULLY REVIEW THE SELECTION CRITERIA AND REQUIREMENTS (PAGE 1 OF YOUR
APPLICATION) TO MAKE SURE YOUR APPLICATION IS COMPLETE. INCLUDE YOUR OFFICIAL
TRANSCRIPT AND LETTERS OF RECOMMENDATION TOGETHER WITH THIS APPLICATION.