APPLICATION FOR HIGH SCHOOL DISTRICT 211 TEACHERS UNION VOCATIONAL SCHOLARSHIP

One scholarship of $2,000.00 will be awarded. Applicants must be seniors who graduate by August, and **must be** planning ***to attend either an accredited trade school or university and enroll in a dedicated program for vocational related fields. Examples include, but are not limited to, - Cosmetology, the Trades – Building Construction related, Culinary Arts, Hospitality Automotive related, etc.***

The entire application may be either written in black ink, OR duplicated in its entirety using a word processing program. OR, to access a writeable/downloadable version, go to www.local1211.org, it is located on the right side of the webpage

☐ **VOCATIONAL SCHOLARSHIP (for students attending a District 211 High School)**
Student MUST have attended a District 211 School since the beginning of their Junior year.

NAME _____ PHONE _____
Last First MI

DISTRICT 211 HIGH SCHOOL YOU ARE ATTENDING _____

☐ **VOCATIONAL SCHOLARSHIP (for students whose parent(s) is/are District 211 Teachers Union Members)**

NAME _____ PHONE _____
Last First MI

NAME OF PARENT WHO IS A DISTRICT 211 UNION MEMBER _____

SCHOOL AT WHICH PARENT WORKS _____

HIGH SCHOOL STUDENT ATTENDS _____

Please provide an e-mail address _____

Please provide a mailing address_____

The **Scholarship Selection Committee** is comprised of one faculty member from each building in District 211. The five members will evaluate applications submitted from each building. Criteria for selection of the winners is based on GPA (course difficulty will also be taken into consideration), in-school activities and contributions, out-of-school activities and contributions, work experience, your vocational goals/objectives, and a written self-evaluation essay.

Winners and school principals will be notified in by April. The presentation of the award will be made at a reception. **WINNERS MUST ATTEND THE RECEPTION ON THURSDAY, APRIL 19, 2012 from 5:30 P.M. until 8:00 P.M. TO RECEIVE THE SCHOLARSHIP**. If a winner is not present, the scholarship will be awarded to another candidate. The scholarship is unrestricted and may be used for tuition, room and board, books, travel expenses, etc.

PLEASE ATTACH AN OFFICAL TRANSCRIPT OR UNOFFICIAL TRANSCRIPT STAMPED OR SIGNED BY A SCHOOL OFFICIAL THAT INCLUDES ALL HIGH SCHOOL GRADES (INCLUDING COURSES IN PROGRESS) AND CUMULATIVE GPA.

APPLICATIONS MUST BE COMPLETED AND RETURNED TO EITHER ONE OF THE FOLLOWING BUILDING REPRESENTATIVES, OR to your D211 School's College and Career Counselor BY MONDAY FEBRUARY 1, 2012.

Representatives

Conant – Patrick Malloy, World Languages
Hoffman Estates – Christine Jenkins, English
Schaumburg – Jason Campbell, Science
Academy South – Paul DuMelle
Fremd – Kevin Palmer, Social Studies
Palatine – Liz Naumann, English
Academy North – Amy Laskiewicz

The following sections may be either handwritten in black ink, OR may be duplicated in its entirety using a word processing program

TECHNICAL/TRADE SCHOOL YOU PLAN TO ATTEND_____

CAREER GOAL(S) _____

EXTRACURRICULAR ACTIVITIES in which you participated at school, such as athletics, clubs, or other similar activities. Check the appropriate school years in which you participated and indicate offices held or leadership positions with a * in the year column: **IN ORDER TO ENSURE FAIRNESS; PLEASE EXCLUDE ALL REFERENCES TO COMMUNITY, SCHOOL, AND MASCOT. FOR EXAMPLE: WOODWORKING CLUB INSTEAD OF CONANT WOODWORING CLUB. OR SCHOOL OUTSTANDING STUDENT RECOGNITION INSTEAD OF VIKING PRIDE, OR CULINARY CLUB INSTEAD OF HOFFMAN CULINARY CLUB.**

ACTIVITY PARTICIPATED	LEVEL OF INVOLVEMENT	YEARS			
		9	**10**	**11**	**12**
_____		___	___	___	___
_____		___	___	___	___
_____		___	___	___	___
_____		___	___	___	___
_____		___	___	___	___

OUT OF SCHOOL ACTIVITIES in which you participated: volunteer work (not including requirements for graduation) clubs, religious activities, community involvement, etc. State the approximate time spent in these activities per year. **IN ORDER TO ENSURE FAIRNESS, PLEASE EXCLUDE ALL REFERENCES TO COMMUNITY. FOR EXAMPLE -LOCAL JAYCEES INSTEAD OF SCHAUMBURG JAYCEES.**

Note: A separate verification form is required for each activity listed. See page 4.

ACTIVITY PARTICIPATED	LEVEL OF INVOLVEMENT	HOURS PER YEAR			
		9	10	11	12
_____		___	___	___	___
_____		___	___	___	___
_____		___	___	___	___
_____		___	___	___	___
_____		___	___	___	___

HONORS, AWARDS, CERTIFICATIONS or RECOGNITIONS received in school, or out of school activities.

HONOR	DESCRIPTION

COURSE WORK, TRAINING, INTERNSHIPS, AND/OR WORK EXPERIENCE RELATED TO YOUR VOCATIONAL FIELD/GOALS – EXAMPLES INCLUDE –
Restaurant work/Hospitality, Retail, Auto Mechanics, Child Care, Tech Crew/Lighting etc.

DESCRIPTION (Location & Responsibilities)	YEARS			
	9	10	11	12
	___	___	___	___
	___	___	___	___
	___	___	___	___
	___	___	___	___
	___	___	___	___

STUDENT SELF EVALUATION

*Note – The essay is worth more than one-quarter of your overall evaluation

In addition to the information you have already provided in your application, we would ask that you write a brief essay (maximum of 2 pages, double-spaced) that describes your inspiration for your vocation as well as your future goals. Proper grammar and spelling is expected.

COMPLETE ONE VERIFICATION FORM FOR EACH OF THE VOCATIONAL EXPERIENCES
You will need to duplicate for each *vocational related activity* that you have listed on page THREE.

Vocational Experience Verification Form
District 211 Union Scholarship

TO BE COMPLETED BY THE STUDENT:

Student Name_____

Type of vocational experience: _____

Year/Time you participated: _____

Number of hours spent: _____

Explain your participation or voluntary role: Be as specific as possible using only the space provided. (11 font, no smaller, please). **You will be evaluated on both your activity and response.** Bullet points or brief paragraph form is acceptable. DO NOT ALTER THIS FORM IN ANY WAY.

TO BE COMPLETED BY ADULT SUPERVISOR/SPONSOR:
The area below must be filled out by adult supervisors/sponsors. Failure to have all of the proper information included will invalidate the application for the student.

By signing this statement, you are confirming that as a part of your relationship with the student who submitted this form, he or she has spent at least **the number of hours listed above** and has worked satisfactorily.

Name of Adult Supervisor/Title (please print) _____

Signature of Adult Supervisor _____

Phone Number (and extension) _____

Email Address _____

LETTER OF RECOMMENDATION

Submit a letter of recommendation (maximum of one page single-spaced) from one of the adults who has been involved in your training or supervision, and would be familiar with your vocational abilities, goals and interests. For example: A teacher, instructor, or work supervisor. **Submit this with your completed scholarship application. Allow adequate time for this individual to receive and complete this letter to meet the submission deadline.**