

# Illinois Principals Association Egyptian Region SCHOLARSHIP APPLICATION

2019-  
2020

Dear Applicant,

The Egyptian Region of the Illinois Principals Association is committed to growing the teaching profession and offering a scholarship to high school seniors and college freshman interested in becoming teachers. The scholarship, valued at \$500, will be awarded at our Student Recognition Breakfast on March 5<sup>th</sup>, 2020. Interested applicants need to complete the following checklist and send materials to:

IPA Scholarship  
c/o Charley Cass  
1500 E. Ninth  
West Frankfort, IL 62896

Required Items:

- Completed application (attached)
- Cover letter stating why you would like to join the teaching profession
- Transcripts
- Three letters of reference - one letter from a school administrator, one letter from a teacher and the third letter can be from whomever you choose.

All application packets must be postmarked by January 24, 2020. Our selection committee will select our winner(s) at our February 4<sup>th</sup> meeting.

All questions can be directed to Charley Cass at [ccass@wfschools.org](mailto:ccass@wfschools.org).

Respectfully,



Charley Cass  
Region Director

**Illinois Principals Association Egyptian Region  
SCHOLARSHIP APPLICATION**

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You must either type or print all your answers neatly in ink. Application response must be mailed to **IPA Scholarship, 1500 E. Ninth West Frankfort IL 82896. Scholarship application, cover letter, transcripts and letters of recommendation must be postmarked by 1/24/2020 to the above address.**

1. Name \_\_\_\_\_, \_\_\_\_\_ M.I.  
Last First

Permanent mailing address

\_\_\_\_\_ Number and street

\_\_\_\_\_ City State Zip E-mail

Phone \_\_\_\_\_

2. High school or college GPA: \_\_\_\_\_ (4.0 requirement on a 5.0 scale, 3.0 on a 4.0 scale)

3. Please list your top three colleges or universities you will be applying to:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. This scholarship is aimed at those interested in the teaching profession.  
What teaching areas are you interested in?

\_\_\_\_\_  
\_\_\_\_\_

**CERTIFICATION. ALL APPLICANTS:** I certify that all information I have provided on this form is true and complete to the best of my knowledge. I agree to give proof of the information on this application if requested. I give permission to selection committees to review information on this form, my transcripts, and any additional supporting documentation submitted as part of this application. I give permission for selection committees to contact high school and/or college officials for additional academic information.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Applicant's Name \_\_\_\_\_