



2021-2022 ADULT SCHOLARSHIP APPLICATION FOR REGION # ____

ASSOCIATION FOR COMPENSATORY EDUCATORS OF TEXAS (ACET)

This application is for paraprofessionals currently working in a compensatory education program who **desire to become a teacher**. The scholarship will be awarded during the ACET Spring Conference and provides \$1,000 to the recipient **to be used within one year from the time the scholarship is awarded**. The scholarship will be paid directly to an accredited university or college (not directly to the scholarship recipient).

PERSONAL INFORMATION	Student Name (Last, First, Middle):			
	Email:	Phone Number:		
	Home Address:	City	State	Zip
	Mailing Address:	City	State	Zip
	Alternate Contact Name (Last, First, Middle):			
	Alternate Contact's Email:		Alternate Contact's Phone Number:	

EDUCATION INFORMATION	High School Name	School District of High School		
	High School Mailing Address			
	High School Graduation Date			
	Name of College attended (if applicable)	College Mailing Address		
	NOTE A copy of your HS diploma, HS transcript, GED certificate, or latest official college transcript must be attached and submitted as part of this application.			

FUTURE PLANS	Name of college or university you plan to attend:		
	City	State	Major/Minor
	Have you applied for admission?		Have you been accepted?

Applicant Name: _____

EMPLOYMENT INFORMATION	Name of School where currently employed	
	School District	Job title
	Program: ___ Bilingual/ESL ___ Pregnancy Related Services ___ Homeless ___ Migrant ___ State Compensatory Education (At Risk) ___ Title I Intervention ___ Other (please specify) _____	
	Description of Job Responsibilities:	

LETTERS OF REFERENCE	Two (2) letters of reference must be submitted.
	<ul style="list-style-type: none"> One letter <u>must</u> be from a current educator or administrator. All letters of reference must include the position title, address, and telephone number of the person making the recommendation. <u>Letters should include information regarding applicant’s scholastic ability, character, and work ethic.</u>

COMPENSATORY EDUCATION CERTIFICATION	<i>To be considered for selection, an applicant must be employed during the current school year in a federal or state funded compensatory program.</i>	
	** REQUIRED CERTIFICATION ** I certify that the above named adult applicant is employed with the _____ School District working in the following compensatory education program:	
	___ Bilingual/ESL ___ Homeless ___ State Compensatory Education (At-Risk) ___ Other (please specify) _____	___ Pregnancy Related Services ___ Migrant ___ Title I Intervention
	_____ SIGNATURE OF SCHOOL DISTRICT OFFICIAL	_____ DATE
_____ PRINTED NAME	_____ POSITION TITLE	

Applicant Name (PRINT): _____

NARRATIVE

Must be written in the space provided. No attachments accepted. Minimum 10 point font size.

Express why you want to become a teacher, what you have learned from your involvement in a compensatory education program, and why you should receive this scholarship. The essay should show: Sincere desire to further education for continued self-growth, definite educational goals, clarity, neatness and expressiveness



ACET Adult Scholarship

Association for Compensatory Educators of Texas

PERMISSION FOR PUBLICATION

To showcase and highlight the Association for Compensatory Educators of Texas (ACET) scholarship recipients, ACET would like to post your name, school/district information, future plans, and picture in marketing pieces. These marketing pieces include, but are not limited to, video/photo projects, presentations, print publications and advertisements, website posts, and posts on social media sites and apps (e.g. Facebook, Twitter, Instagram). By participating, you will assist ACET in positively promoting the organization and celebrate the success of recipients.

Check one option below:

YES **NO** I **grant** permission for the Association for Compensatory Educators of Texas (ACET) to publish my name, school district, school name, photograph, and future plans on the ACET website and/or other media platforms used by the organization to recognize scholarship recipients.

Applicant Name (PRINT) _____

Applicant Signature _____ **Date** _____
mm / dd / yyyy

****ACTION**** Please print and sign/date this form, then return to ACET with your completed application.