

***OADEP Instructor Scholarship Application-Due March 31, 2023***

Please complete all the information on the scholarship application. **Applicant must be currently employed as a teacher and school district must be an OADEP member** to be considered for the OADEP Scholarship.

**First Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Last Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Email Address**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Cell Number**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Home Address**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Work Number**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name of School District Employer**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Street Address of School District Employer**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**City, State, Zip Code of School District Employer**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Academic Subjects and Grade Level Applicant Currently Teaches** (i.e. English, Mathematics):

Subject/Course Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade Level: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Subject/Course Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade Level: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Applicant Educational Background**: (**Please provide** **unofficial** **copies of all transcripts**)

Bachelor’s Degree Title (i.e., B.Ed. English Education): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Bachelor’s Degree University Name, City, State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Master’s Degree Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Master’s Degree University Name, City, State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Additional Degree Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Additional Degree University Name, City, State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Applicant Questions:**

1. Are you currently teaching CCP college courses? Yes: \_\_\_\_ No: \_\_\_\_
2. Have you previously taught CCP college courses? Yes: \_\_\_\_ No: \_\_\_\_
3. Have you completed any graduate coursework in the academic subject content area that you wish to offer College Credit Plus college courses? Yes: \_\_\_\_\_\_\_ No: \_\_\_\_\_\_\_\_
4. If Yes, how many additional graduate course credit hours have been completed? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. Are you currently enrolled in a graduate program in the academic subject content area you wish to teach for College Credit Plus college courses? (i.e. Master’s in English, Master’s in Mathematics, etc.) Yes: \_\_\_\_\_\_\_ No: \_\_\_\_\_\_

(If yes, Name of University where funds will be used: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Are you currently enrolled in a graduate program in Education or other non-subject teaching area? (i.e. Master’s in Education, Curriculum, Counseling Education, Administration, Leadership, Library Science) Yes: \_\_\_\_\_ No: \_\_\_\_\_\_

**If you, the applicant, were awarded the OADEP Scholarship, how would you use the funding? Please check all that apply.**

1. Complete a Master’s Degree in academic subject content area to teach college level College Credit Plus courses in that content area: \_\_\_\_\_\_\_
2. I already possess a Master’s Degree in Education or related area. I wish to earn 18 graduate hours in the academic subject content area to be eligible to teach college level College Credit Plus courses in that content area: \_\_\_\_\_\_\_\_\_\_
3. I want to begin graduate coursework in the academic subject content area starting in which semester?

Summer 2023: \_\_\_\_\_\_\_ Fall 2023: \_\_\_\_\_\_\_ Spring 2024: \_\_\_\_\_\_\_\_

1. **How does the applicant plan to pay for graduate school tuition besides using the OADEP Scholarship? The OADEP Scholarship will only pay for a portion of graduate tuition. Please check all that apply**:

* Applicant School District will reimburse applicant for graduate coursework tuition: \_\_\_\_\_\_\_
* Applicant School District has awarded applicant a scholarship for graduate coursework tuition (i.e. Straight A grant or other grant): \_\_\_\_\_\_\_
* Applicant will use personal funds/savings to pay for graduate coursework: \_\_\_\_\_\_\_\_
* Applicant will secure a graduate school loan to pay for graduate coursework: \_\_\_\_\_\_

**Applicant Reference Information**: Please provide name and contact information for two references. At least one reference should be from a current supervisor/Principal. Please ask references to complete the reference forms on applicant’s behalf addressing the applicant’s ability to complete graduate coursework in a timely manner, and to be successful in completing graduate coursework with a grade of “B“ or higher (Grades below a “B“ in graduate school are considered failing grades).

Letters of recommendation can be used in place of the reference form.

1. Reference Name/Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone/Email Contact Information: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Reference Name/Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone/Email Contact Information: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Completed recommendation forms should come directly from the reference person(s) and can be emailed to: OADEP Scholarship Committee, at Email: [info@oadep.org](mailto:info@oadep.org)

**Additional Instructions/Deadline**:

1. OADEP Instructor Scholarship Applications can be emailed to [info@oadep.org](mailto:info@oadep.org) .
2. Questions about the Scholarship Application can be sent to the Scholarship Application Committee, Email: [info@oadep.org](mailto:info@oadep.org) .

**DEADLINE TO APPLY**: All application materials, essay, and reference forms should be emailed by March 31, 2023 for consideration.