

To: High School Counselors
Re: MCCRTA Scholarship Application

Enclosed, please find scholarship applications for the 2025 MCCRTA \$1000 scholarships. There are several changes we made last year that you need to follow:

- 1) Every school in Marion County and Marion Harding are eligible to apply for the scholarship. Each school may submit a maximum of two (2) applicants that plan to enter the field of teacher education or teach in a related field. If you have more applicants that qualify, please select the top two at your local level.**

- 2) MCCRTA will select the final top two applicants who will receive the scholarships, regardless of the school. In other words, one school could receive both scholarships, or they can be divided among two schools.**

Why did we change the alphabetical school procedure we have followed in the past? Because for several years, the eligible school has had only 1 applicant, and perhaps that year other schools might have had eligible applicants. We want to utilize our scholarships, thus the change to all schools being eligible each year.

Please feel free to duplicate the scholarship forms as needed,

MCCRTA SCHOLARSHIP Application

Name of Student _____
(first) (middle) (last)

Home Address _____
(City) (State) (Zip Code)

Email _____ Phone _____
(Cell or Home)

High School _____ Graduation Year _____

G.P.A. _____ Planned College Major _____

List Colleges applied or been accepted _____

Mother's Name _____ Occupation _____
(Phone No. _____)

Father's Name _____ Occupation _____
(Phone No. _____)

Anyone in family a teacher? (Yes / No) (Who) _____

Anyone in family a MCCRTA member? (Yes / No) (Who) _____

List any financial aid you will be receiving (including other scholarships,
loans or grants) _____

How do you plan to finance your college education? _____

Extra Curricular activities _____

Awards or Honors _____

Community Service _____

Employment _____

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ESSAY: "How do teachers influence the lives of students?"
(attach the typed essay to this application along with a current transcript and return to your high school counselor by March 15th.)

Applicant's Signature _____ **Date** _____

Parent's Signature _____

Counselor's Signature _____

Counselor's Phone No. _____

The Marion City/County Retired Teachers Association Scholarship Committee looks forward to receiving your application. The school and winner will be notified.

Sincerely,

**Dennis Swartz
Scholarship Chairman
740-225-5499**