



**2020 Professional Scholarship Application**  
**Association of Texas Professional Educators**  
**Galena Park Local Unit**

Galena Park Local of the Association of Texas Professional Educators awards scholarships on an annual basis to GPISD employees who are pursuing an education degree, a graduate degree in education or attending an education workshop. The scholarship monies may be applied toward the cost of tuition, fees, books or the workshop. The Scholarship Award was established to honor and reward distinguished, dedicated educators that wish to continue pursuing educational excellence. The scholarship amount is \$500.00 maximum for the 2020-2021 school year.

**Award Criteria:**

1. Applicant must be a full time employee in Galena Park ISD.
2. Applicants must use the 2020 ATPE Galena Park Local Unit Scholarship Application.
3. Application should be typed or printed clearly using black ink.
4. A degree in the field of education is being pursued or an education workshop will be attended.
5. The personal statement should be 200 words or less. Why is the scholarship desired?
6. Two letters of recommendation from administrators or co-workers are required and must be submitted with the application.
7. **Completed application, including personal statement, must be received via fax, or inner-office mail, by Friday March 6, 2020 or postmarked no later than midnight March 4, 2020.**

**Selection Process:**

1. Applications must be received via fax, or inner-office mail by March 6, 2020 or **postmarked** no later than **midnight March 4, 2020**. The committee will not consider late, incomplete or illegible submissions.
2. The Scholarship Selection Committee members will review the applications.
3. The scholarship winners will be announced at the April 28, 2020 ceremony.
4. The scholarship monies will be awarded upon receipt of proof of completion by the Galena Park Local Unit Treasurer. Upon completion of course or in-service, a transcript or a certificate of completion must be submitted to ATPE Local Unit Treasurer. This scholarship must be used between June 1, 2020 and May 31, 2021.
5. Send completed application, including personal statement and two letters of recommendation to:

**Galena Park Local Unit ATPE Scholarship**  
**c/o Lynn Nutt**  
**GPISD Administration Building**  
**14705 Woodforest Blvd.**  
**Houston, TX 77015**  
**Fax 832 386-1427**



## 2020 ATPE Galena Park Local Unit Professional Scholarship Application

(Type or print clearly using black ink.)

### Personal Information:

NAME: \_\_\_\_\_

Home Address: \_\_\_\_\_

City, State & Zip: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Home Email: \_\_\_\_\_

Cell number: \_\_\_\_\_

### Employment Information:

School District: \_\_\_\_\_ How Long? \_\_\_\_\_ Telephone: \_\_\_\_\_

Current Position/Campus: \_\_\_\_\_

School E-mail \_\_\_\_\_

Previous Positions: Place, Position, Years \_\_\_\_\_

Highest Degree Held: \_\_\_\_\_

Degree/Certification Sought: \_\_\_\_\_

University/Location: \_\_\_\_\_

*OR*

Workshop Title: \_\_\_\_\_

Location: \_\_\_\_\_

**I assert that all information included on this application is true and accurate:**

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*All applicants will receive consideration for the ATPE Galena Park Local Unit Member Scholarship without regard to sex, race, color, national origin or ancestry, religion, age, handicap, or marital status.*



## 2020 ATPE Professional Scholarship Application Data Collection Sheet

*Type or print clearly using black ink. Only list information pertaining to the last three (3) years.*

Applicant: \_\_\_\_\_

Honors and Awards	Explain	Year

School Activities/Responsibilities	Explanation if Needed

Community Activities	Explanation if Needed

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*Personal Statement*



Applicant: \_\_\_\_\_

**Instructions:** Make a personal statement of no more than 200 words, either about the impact that education has had on your life thus far and tell about the vision you hold for your future based on your education journey or describe how the awarding of this scholarship will help you become a better educator. Type or print clearly using black ink. Illegible entries will not be considered. You may use this space and continue on an additional sheet if necessary. Additional documentation may be submitted.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_