PDK CHAPTER APPLICATION

The PDK Educational Foundation annually awards scholarships to prospective educators. This application form is for high school seniors

Once comp	leted, this	application must be returned by M	March 25,2016, to the follow	ing PDK chapter representative:	
•	=	PDK Chapter Representative:			
PDK Chapter Name Johns Hopkins University					
PDK Chapter Representative's Name			Joyce P. Wo	ebb, Ph.D	-
E-mail	jpwebł	ol@comcast.net	Phone	443-759-9030	
Mailing Ad	dress	E-mail Only	City/State/Zip	E-mail Only	
		ON PROCEDURES	later than March 25.2016 to	the PDK representative listed above. All	l
ap	plications			April 1 to forward its top two application	
Ai	PPLICATION	ON GUIDELINES			
		rement – You have decided as a gou and how you see yourself accom		e a teacher. Please share your vision as to 00 words or less).	what that
ac		ilities and school activities, and sh		tter must be from a person familiar with yn teaching and the qualities that will make	
		t – Request a copy of your high sc ank, and grade point average.	hool transcript from your s	chool counselor. Your transcript must incl	lude class
YOUR CO	MPLETED	APPLICATION SHOULD INCLU	DE:		
Your	goals state	ement			
Refer	ence letter				
Trans	cript				
This a	application	ı form			
FAFS	A (if requ	ired)			

Do not send folders, binders, photographs, or other attachments. Make a copy of the completed application for your records.



Please type or print legibly in black ink.

LAST NAME	FIRST	NAME	MIDDLE INITIAL
STREET ADDRESS	CITY	STATE or PROVINCE	ZIP OR POSTAL CODE ()
E-MAIL ADDRESS			TELEPHONE
HIGH SCHOOL NAME			
HIGH SCHOOL ADDRESS			
What is your gender?	Male Fem	ale	
separately to the chap Transcript is attached. Transcript will be sent se	ranscript must a oter representat parately. (The	accompany your application ive.	on. Indicate if the transcript is attached or will be sent d by March 1, 2016.)
		nformation. See your high figured on a 4.0 scale.)	school counselor if you need assistance.
Once I earn my teaching ce Preschool/Early Childho Elementary students (Gr Middle School Students High School Students (C College Students	ood/Prekinderg rades K-6) (Grades 7-8)		ing students. Check only one:

EDUCATIONAL ACTIVITIES

List activities where you have worked with others in a teaching or learning capacity. Include any education-focused clubs or organizations you belong to. You can attach a separate sheet with your response.

LEADERSHIP ACTIVITIES

List activities where you have served as a leader. Include any offices you have held in clubs or organizations. These activities could be both in school and outside of school. You can attach a separate sheet with your response.



SERVICE ACTIVITIES

List activities where you have participated in service projects	. These activities could be both in school and outside of school. Y	ou can
attach a separate sheet with your response.		

OTHER ACTIVITIES

List employment and other significant extracurricular activities not mentioned above. You can attach a separate sheet with your response.

REFERENCE

List the person you have asked to provide your letter of reference. The letter must be from a person familiar with your academic abilities and school activities, and should address your interest in teaching and the qualities that will make you a successful educator. List the name, title, and telephone number or email address. Attach the letter of reference to this application form and make sure that your name is in the upper right corner.

Name		
Title		
E-mail Ad	dress or Phone Number	

GOALS STATEMENT

You have decided as a goal that you want to become a teacher. Please share your vision as to what that means to you and how you see yourself accomplishing this goal (about 100 words or less).