

Grow Your Own Teacher | Alumni Scholarship Application

Due Date : _____

Please include a copy of your transcript.

APPLICANT INFORMATION		
Last Name	First Name	M.I.
Preferred First Name (if different from above)	Year you graduated from Neosho Schools	
Street Address		
City	State	Zip Code
Telephone	E-mail Address	
Ethnicity/Race: <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Hispanic <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> Caucasian/ White <input type="checkbox"/> Other *All applicants will be considered		
ACADEMIC DATA		
Cumulative College GPA:		

School Activities and Honors

List your school involvement and extracurricular activities:

Teaching Level Interests:

___ Elementary (K-6)
___ Secondary (7-12)

Content Area (English, Math, Special Education etc...):

College or University you plan to attend:

COMMUNITY ACTIVITIES

Community Involvement

List your overall community involvement:

Community Service

List your community service:

Why have you chosen to pursue a degree in the education field (200-300 words)?

Why do you want to come back and teach in the Neosho School District (200-300 words)?