**Magic Scholarship for Teachers Application**

*For currently employed Barberton educators at Barberton High School seeking dual credit certification for their specific teaching field.*

**Submission Deadline: No deadline, must apply 45 days prior to when monies are due**

**The Barberton Community Foundation must receive a recommendation from the Barberton City School District on your behalf before making application.**

**A. Personal Information**

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

 First Middle Last

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City:

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birth Date: \_\_\_\_\_\_ / \_\_\_\_\_\_ / \_\_\_\_\_\_\_\_\_

Day Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Evening Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Gender: Male \_\_\_\_ Female \_\_\_\_ Social Security #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**B. School Information**

University Attending: Dual Credit Program:

Credit Hours: Course Title:

Student ID:

**C. Certification**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, understand that by applying to the Barberton Community Foundation

 (full name)

for this scholarship, that should I voluntarily leave the Barberton School District or be terminated for cause at any time from

accepting the scholarship to after two years of receiving my certification, I will reimburse the Barberton Community

Foundation in full. I further certify that all statements in this application are true and correct.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

Applicant Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Application Checklist**

*All documents below must be included with application unless otherwise noted*

|  |  |  |
| --- | --- | --- |
| **Include with application:** | **Instructions** | **Check if completed** |
| Recommendation from Barberton City School District | Letter to the Barberton Community Foundation recommending you to apply for this scholarship. |  |
| Signed Application | Stating your understanding of the reimbursement policy of this scholarship should you voluntarily leave or be terminated for cause 2 years after receiving the certification (as defined in the signed Certification). |  |
| Official Transcript | **Only** if you received the Magic Scholarship for Teachers in the prior year |  |

**Additional Information**

*Do not submit this page*

**Applicants must:**

1. Be recommended by the Barberton City School District and recommendation must be received by the Barberton Community Foundation before applying.
2. Be currently employed by the Barberton City School District at Barberton High School.
3. Awardees must maintain employment with Barberton City School District for at least 2 years following certification completion.
4. If award recipient voluntarily leaves or is terminated within two years of certification completion, recipient must reimburse the Barberton Community Foundation in full.

**Scholarship Use:**

The scholarship may be used for payment of tuition for coursework specific to receiving dual credit certification.

**Other Information:**

• Scholarship amount: Up to $2,000 each annually.

• This scholarship is not automatically renewable.

• Students may submit their applications on an annual basis.

• Scholarship awards will be sent directly to the educational institution.

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| --- |
| **Application Due Date: Applications are accepted on a rolling basis and must be received at least 45 days prior to when tuition monies are due. Scholarship decisions will be made within 45 of received complete application.** |
| **Email or deliver the completed application to: Carrie Herman, Director of Community Impact cherman@barbertoncf.org**Magic Scholarship for TeachersBarberton Community Foundation460 West Paige AvenueBarberton, Ohio 44203 |
| **Incomplete applications will not be considered** |
| Applicants will be notified within 45 days after their submission. |

*Please retain a copy of this application and any other materials you may need for your records, as we are unable to return documents to applicants. In order to process applications,* ***all required documents******must be enclosed with your application****. Please do not send paperwork separately. Make sure your name is printed clearly on all enclosures.*