December 18, 2013

Dear Financial Aid Office,

Enclosed is the 2014 information and application for the Illinois Retired Teachers Association Foundation Scholarship. These documents can also be accessed from our website at www.irtaonline.org, at the top banner heading IRTA Foundation, then programs, and finally click on scholarships.

Making your students aware of this opportunity would be greatly appreciated. If you have any questions, please feel free to contact me at susan@irtaonline.org or call 1-800-728-4782.

Thank you for your assistance!

Sincerely,

Susan Goetz
Administrative Assistant
1-800-728-4782
susan@irtaonline.org

Enclosures
ILLINOIS RETIRED TEACHERS ASSOCIATION FOUNDATION, INC.

IRTA FOUNDATION SCHOLARSHIP

1. GENERAL INFORMATION
   A. The scholarship will be awarded to one full-time student each academic year for each IRTA Foundation area.
   B. The scholarship recipient shall receive a grant of $750 each for fall and spring semesters, totaling $1,500 for the year, to be used for educational expense.
   C. If for any reason the recipient does not conform to any or all policies, the IRTA Foundation Board has the right to revoke the scholarship.
   D. All applications must be postmarked on or before March 7, prior to the applicant’s junior or senior year in college, and mailed to the office of the IRTA Foundation. Recipients will be notified by April 21 of that same year.

2. ELIGIBILITY
   A. An application must be postmarked no later than March 7 and mailed to the IRTA office prior to a student’s junior or senior year in college. The student must be accepted into a Teacher Certification Program in order to receive IRTA Foundation Scholarship funding.
   B. Applicants must be a resident of Illinois or have graduated from an Illinois high school.
   C. Applicants may attend school in any state as long as the school attended maintains an accredited Teacher Training program.
   D. Applicants must have and maintain at least a 3.0 GPA on a 4.0 scale.
   E. The recipient must furnish a copy of the university or college official transcript prior to receiving funds.

3. APPLICATION PROCEDURE
   A. Each applicant must complete an application provided by the IRTA Foundation.
   B. The applicant must submit a one-page statement (double-spaced, if typed) stating educational intent and special family circumstances.
   C. Three letters of recommendation, from other than family members, must accompany the application. Please include name of reference, applicant’s relationship to the reference, and a means of contacting the reference.
   D. A transcript from all colleges attended by the student must accompany the application.
   E. Each applicant must sign a Consent to Release Information form authorizing the IRTA Foundation to verify the accuracy of all information and documentation submitted with the scholarship application.
   F. Verification of acceptance in a Teacher Education Program. (If a Community College student, a letter of acceptance from the University or University class schedule with course of study indicated.) (If a University student, school of study will be on official transcript.)

Inquiries or questions, please contact Susan Goetz at the Illinois Retired Teachers Association Foundation, 620 N Walnut Street, Springfield, IL 62702, 1-800-728-4782 or email susan@irtaonline.org.
ILLINOIS RETIRED TEACHERS ASSOCIATION FOUNDATION, INC.
APPLICATION FOR IRTA FOUNDATION SCHOLARSHIP 2014

PERSONAL DATA
Applicant’s name: (Last) __________________________ (First) __________________________ (Middle) ______________

Address: ____________________________________________________________

(City) __________________________ (State) __________________________ (Zip) ______________

Home Phone: ( ) __________________________ Cell Phone: ( ) __________________________

Email: ________________________________________________________________

If not an Illinois resident, high school graduated from: __________________________

Marital Status of applicant:

_____ Single _____ Married _____ Separated _____ Widowed _____ Divorced

Information requested below is for applicant’s parents or spouse if applicant lives with or is financially
dependent on parents or spouse for support. Independent applicants should list personal information. The
Foundation reserves the right to request copies of income tax returns.

Number in Household: __________ Number of Dependent Children: __________ Number in college __________

Total taxable household income from previous tax year (check one):

_____ 0 - $20,000 _____ $20,001 - $30,000 _____ $30,000 - $40,000 _____ $40,001 - $50,000 _____ Over $50,000

Please specify each source of this income. (If needed, please use a separate sheet of paper.)
Please indicate all non-taxable income received or expected to receive (source and amount). Examples
include JPTA assistance, welfare assistance, educational social security or veteran’s educational benefits.

________________________________________________________________________

I certify that the above information is true and correct to the best of my knowledge.

________________________________________________________________________

STUDENT’S SIGNATURE __________________________ DATE __________

________________________________________________________________________

SIGNATURE OF PARENT OR SPOUSE (PLEASE CIRCLE ONE) __________________________ DATE __________

ACADEMIC INFORMATION
Previous college attendance
Name of Institution and Dates attended: __________________________

________________________________________________________________________

Institution attending in 2014-2015:

TRANSCKTS FROM ALL COLLEGES MUST ACCOMPANY THIS APPLICATION

Note: Be sure to include the following: (1) Three letters of recommendation (not from family members), (2)
One page (double spaced) personal statement of need and reasons for applying for scholarship, (3) All
official college transcripts, (4) Form giving Consent to Release Information, (5) Verification of acceptance in
a Teacher Education Program (if transferring from a Community College).

Postmarked on/before March 7, 2014 to: IRTA Foundation, 620 N. Walnut Street, Springfield, IL 62702
Attention: Susan Goetz
(217) 523-8488 (800) 728-4782
CONSENT TO RELEASE INFORMATION

I, ____________________________, give Consent for the IRTA Foundation to announce my award-winning in the media if I am a recipient of an IRTA Foundation Scholarship.

______________________________
APPLICANT SIGNATURE

______________________________
DATE