



2024 PORTLAND ASSOCIATION OF TEACHERS

PAT FUTURE EDUCATOR OF COLOR SCHOLARSHIP APPLICATION

Criteria for Eligibility and Evaluation

TO BE ELIGIBLE for a PAT Future Educator of Color Scholarship, the applicant must:

1. Be a **Portland Public Schools employee**.
2. Be a **person of color**.
3. **Be pursuing an undergraduate or graduate degree working towards the goal of becoming a certified educator** (classroom teacher, counselor, social worker).
4. Show a potential for successful use of the scholarship funds.
5. Present a completed application form with **two (2) Professional Letters of Recommendation** (use attached forms or attach to the form) from two separate people:
 - one letter from a **certified licensed PPS school employee** (does not need to be an administrator, but can be).
 - one letter from a person who has worked with you in an academic or community setting. This can be a school employee, another employer, supervisor, community member, mentor, professor, etc.
5. Meet the following criteria:
 - Experience with working with youth in a school or after-school setting
 - Turned in completed application. Be sure to fill in all sections. (Handwritten applications will **not** be accepted.)
6. Scholarship recipients must be:
 - Registered in an approved credential or degree program in an accredited post-secondary institution; or
 - Registered as at least a half-time student in an accredited institution of higher learning.

DEADLINE FOR SUBMITTING COMPLETED APPLICATIONS:

FRIDAY, APRIL 19, 2024

Submit to: PAT Scholarship Committee
345 NE 8th Avenue
Portland, OR 97232

OR

Email completed application & all attachments in **ONE EMAIL** to
kelly.mckenna@oregoned.org with subject line: **PAT SCHOLARSHIP APPLICATION**

2024 PAT MEMBERS' SCHOLARSHIP APPLICATION INFORMATION CHECKLIST

Please Note:

1. Applications must be submitted by mail or email on the approved **2024 PAT** application forms. Incomplete applications or applications **postmarked or emailed after April 19, 2024, will not be considered.**
2. Answer all questions. Applications must be typed. Handwritten applications will **not** be accepted. Be sure to fill in all sections.

The applicant is responsible for the following:

- ☐ Complete Application Form.
- ☐ Activity Records (community)
- ☐ Applicant's Statement
- ☐ Two (2) Letters of Recommendation. **Only Letters of Recommendation submitted on the enclosed forms or attached to the forms and enclosed with this application will be considered.** Letters of Recommendation accurately communicate the applicant's qualities and achievements.
 - A least one Letter of Recommendation must be from a **certified/licensed** school employee or supervisor.
 - One letter **may be** from a person who is **not a school employee**, like a non-school supervisor or co-worker, mentor, community organization, etc.
- ☐ **OFFICIAL TRANSCRIPTS REQUIRED** – Current official transcripts must be submitted with this application **if you are currently enrolled in a college program.** If not, you may submit transcripts showing previous coursework.

APPLICANT INFORMATION

Applicant Full Name:

Phone:

Home Address:

Birthdate:

Gender Identity:

**Applicant's Social
Security Number:**

Racial Identity:

Ethnic Identity:

Languages spoken:

Counselor:

Phone:

**Will you be the first generation
to attend college in your family?**

Are you currently working at PPS?

**Do you plan on continuing to work at
PPS until the end of the academic
year? If not, why?**

**If you are enrolled in a program,
what is your anticipated graduation
date?**

**If you are enrolled in a program,
what is your GPA?**

**Are you eligible to be a PAT
member? This scholarship is specific
to people seeking to become licensed
educators**

What household describes your upbringing? You may provide further explanation below if you would like to do so.	1 parent	2 parents	Grandparent	Foster- parent	Other
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

High School(s) Attended:	Dates of Attendance:

College(s) Attended:	Dates of Attendance:

Where do you plan to attend college?	
Intended Major:	
Financial Aid Office Address:	
Financial Aid Office Phone:	

I HEREBY AFFIRM that I intend to enter an accredited school of higher education as a full-time student or as a candidate for an approved credential or degree program. I understand that no funds shall be transmitted until PAT receives notification from the registrar of the institution verifying my enrollment. I understand that enrollment must be completed within the current calendar year.

Date:

Signature of Applicant

COMMUNITY ACTIVITY RECORD

Please complete this section with information regarding your employment, previous work with youth, and participation in organizations within your community.

Community Organizations/Activities/ Employment	Position Held

APPLICANT STATEMENT

- 1. Briefly state (in 200 words or less) Why are you pursuing a career as a certified educator?**

- 2. Briefly state (in 300 words or less) How will receiving the scholarship impact your ability to pursue a career in education? How has your racial identity impacted your opportunities? While not required, please feel free to share other factors that have affected your opportunities such as socio-economic status, immigration status, LGBTQ+ identity, etc.**

LETTERS OF RECOMMENDATION

1. FROM CERTIFIED/LICENSED SCHOOL EMPLOYEE OR ADMINISTRATOR

The applicant is required to submit (1) Letter of Recommendation from a certified/licensed school employee who is familiar with the applicant's academic performance.

Cite specific examples which demonstrate the criteria listed below and add other items that may be of interest to the Scholarship Committee:

- Involvement in and sensitivity to human, social, and civic issues
- Characteristics such as responsibility, reliability, and integrity
- Academic and vocational potential
- Special achievements

2. FROM A PERSON WHO HAS WORKED WITH YOU IN AN ACADEMIC OR COMMUNITY SETTING.

The applicant is required to submit (1) Letter of Recommendation from a person who may not be an immediate family member and is familiar with the applicant's academic performance. This can be a school employee, another employer, supervisor, community member, mentor, professor, etc.

Cite specific examples which demonstrate the criteria listed below and add other items that may be of interest to the Scholarship Committee:

- Involvement in and sensitivity to human, social, and civic issues
- Special achievements



Important! Scholarship applicant: This is how your application is scored. Please make sure you address each of these areas *separately* in the given categories.

Score Applicants 1-5 – 5 being the highest score

Date:	
Applicant's Full Name:	

COMMUNITY ACTIVITY RECORD	SCORE
Community Organizations / Activities / Employment	
Award / Honors / Achievements	
	SCORE
APPLICANT STATEMENT	
SPECIAL CIRCUMSTANCES	
LETTERS OF RECOMMENDATION	
GRADE POINT AVERAGE	
TOTAL SCORE	

Total Possible Score (30/30)

GPA Scoring:

3.75 – 4.00 = 5
3.50 – 3.74 = 4
3.25 – 3.49 = 3
3.00 – 3.24 = 2
Below 3.0 = 1