

Year: _____ Scholarship: _____ Name: _____



AATSP-VA SCHOLARSHIP APPLICATION FORM

**Please check scholarship for which you are applying.

_____ Embassy of Spain, Spain
_____ Cemanahuac Educational Community, Mexico

_____ AATSP Membership #
Member since _____

**Must have joined AATSP no later than Jan. 10 of year applying

_____ Last Name First Name Middle Initial

_____ Street Address City State Zip

_____ Email address where you can be contacted Home Telephone # w/Area Code

_____ School

_____ Street Address of School City State Zip

_____ School Telephone # w/Area Code School or Home Fax # w/Area Code

_____ Language Classes/Level Currently Teaching

_____ # Years Employed at Current School # Years Teaching Spanish # Years in VA

Please answer the following questions (use additional paper if necessary):

1. Have you ever studied in a Spanish-speaking country before? Yes _____ No _____

| School or Program | Location | Inclusive Dates |
|-------------------|----------|-----------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |

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2. Have you ever studied in specialized training programs in the US that included total immersion? Yes _____ No _____

| School or Program | Location | Inclusive Dates |
|-------------------|----------|-----------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |

3. Have you ever led student travel experiences to Spanish speaking countries? Yes ___ No ___

| Program | Location | Inclusive Dates |
|---------|----------|-----------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |

4. Education: List College Degrees Earned

| School | Location | Major | Inclusive Dates |
|--------|----------|-------|-----------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

5. Professional Accomplishments (list, give inclusive dates, and briefly describe)

8. Self-evaluation of your language proficiency: Reading Writing Listening Speaking
(Select from excellent, good, fair, poor) _____

Your signature confirms the acceptance of the following conditions. Please initial the blanks.

_____ I will complete the entire course.

_____ I will write a photo essay for posting on the ASSTSP-VA website about my scholarship experience.

_____ I will present a session at FLAVA about how my scholarship has impacted by teaching.

_____ I affirm that I have not received a teacher grant or scholarship from AATSP-VA in the past 5 years.

Signature Date

Year: _____ Scholarship: _____ Name: _____

TO BE COMPLETED BY PRINCIPAL OR HEAD MASTER for TEACHER APPLICANT

Please confirm the following statements by initialing the spaces:

_____ During the current academic year of application for this scholarship, the applicant is a full-time teacher scheduled to teach at least 3 sections of Spanish per week.

_____ During the academic year following receipt of this scholarship, it is projected that the applicant will be a full-time teacher and scheduled to teach at least 3 sections of Spanish per week.

Printed or Typed Name of Principal

Name of School

Signature of Principal

Date

Please enclose **THREE (3) copies + the originals** of the following:

- _____ 1. This 3-page application form
- _____ 2. One page typed CV or biographical profile in English
- _____ 3. Two letters of recommendation, not to exceed one page in length each (in English or Spanish)
- _____ 4. 2-page essay in Spanish outlining applicant's teaching philosophy and detailing benefits of award to applicant (Font size should be 12-point Ariel or Times New Roman)

Send two (2) copies of all documents, plus the originals, for a total of **3 complete sets**, to:



Sheila W. Cockey
Scholarship Chair, AATSP-VA
1225 Woodstock Road
King George, VA 22485

Must be postmarked by February 28 of the year applying.

OR

Send electronic version of all documents to:



Sheila W. Cockey
aatspva@gmail.com
Subject line: AATSP-VA Scholarship

Must be date stamped by 11:59 pm February 28 of the year applying.