

**Applicants must be the children of a CEA or CEA-R member**

Applicants may be graduating high school seniors or students already enrolled in an undergraduate program in a college or university.

**Applicants must have a cumulative point hour of 2.5 or above which must be verified by an official high school or university transcript.**

Applicants must be full-time students while enrolled in college.

**Applicants must include a copy of the Student Aid Report from FAFSA, including the Student Aid Index (SAI).**

Applicants must indicate all financial aid (other than student loans) which they expect to receive.

One scholarship, the ***Christa McAuliffe Memorial Scholarship***, will be granted each year to a student majoring in education unless no applicants indicate they are majoring in education.

**REQUIREMENT**

The complete application includes the following:

- A statement of his/her personal philosophy and goals.
- A personal reference from someone other than a family member with original signature.
- An academic reference with original signature.
- Verification of point hour by official transcript.

**PLEASE TYPE SCHOLARSHIP APPLICATION OR USE BLACK INK.**

**Scholarships are for one year. See renewal requirements on page 2.**

A Scholarship Committee appointed by the President with the consent of the Board of Governors, will review all applications and may conduct selective interviews with qualified applicants.

PLEASE TYPE THE SCHOLARSHIP APPLICATION. ALL MATERIALS ARE COPIED AND GIVEN TO COMMITTEE MEMBERS.

APPLICATIONS AND ALL MATERIALS FOR RECIPIENTS MUST BE RECEIVED IN THE CEA OFFICE BY **4:00 P.M., Friday, March 21, 2025.**

## CHECKLIST

- \_\_\_ APPLICATION FORM
- \_\_\_ ACTIVITIES SHEET/ RESUME
- \_\_\_ COPY OF STUDENT AID REPORT FROM FAFSA, INCLUDING SAI\*
- \_\_\_ OFFICIAL TRANSCRIPT\* \*Student Aid Index
- \_\_\_ PERSONAL PHILOSOPHY
- \_\_\_ ACADEMIC REFERENCE WITH ORIGINAL SIGNATURE\*
- \_\_\_ PERSONAL REFERENCE WITH ORIGINAL SIGNATURE\*

**\*Items may be sent separately**

**STATEMENT OF PERSONAL GOALS AND PHILOSOPHY:** *Please submit a one page typed double-spaced statement of your personal goals and philosophy and attach it to this form.*

## References

Please ask a person other than a relative to fill out the attached form and mail it directly to the CEA office. You must submit two references:

1. One must be from an academic instructor with whom you have studied during the past year.
2. Personal reference from someone other than a relative.

**DEADLINE: MUST BE RECEIVED/POST MARKED BY 4:00 P.M. ON Friday, March 21, 2025. Send completed applications to:**

**Columbus Education Association  
Attn: Spring Scholarship  
929 E. Broad Street  
Columbus, OH 43205  
wilkesk@ceahio.org**

### **RENEWABLE SCHOLARSHIP REQUIREMENTS**

- CEA General Scholarship
- Christa McAuliffe Scholarship
- Rhonda Johnson Scholarship

Previous winners may automatically renew their scholarships for up to three years of undergraduate work if they supply evidence of having been full time students and having maintained the required grade point hour during the previous academic year. The amount of the scholarship for the second year will be one-half (1/2) the amount of the first year. The amount for the third and fourth years will be one-fourth (1/4) the amount of the first year.

**Verification of point hour and full-time status for renewable scholarship recipients must be in the CEA office by 4:00 p.m. on Friday, August 1, 2025.**



**2024-2025  
SCHOLARSHIPS APPLICATION**

NAME \_\_\_\_\_ TELEPHONE \_\_\_\_\_

COMPLETE MAILING ADDRESS \_\_\_\_\_  
\_\_\_\_\_

STUDENT EMAIL \_\_\_\_\_

CEA MEMBER NAME \_\_\_\_\_ Building \_\_\_\_\_

Non CCS Member Email \_\_\_\_\_

Parent 1 Name \_\_\_\_\_

Parent 1 Occupation/Location \_\_\_\_\_

Parent 2 Name \_\_\_\_\_

Parent 2 Occupation/Location \_\_\_\_\_

Applicants must include a copy of the Student Aid Report from FAFSA, including the Student Aid Index (SAI).

Other children who live at home and their ages \_\_\_\_\_

Other children in college and their probable graduation date \_\_\_\_\_  
\_\_\_\_\_

All financial aid (other than student loans) which you expect to receive. List names and amounts.  
\_\_\_\_\_

Attach separate sheet to indicate any exceptional expenses if applicable.

**Please fill in the appropriate lines below**

Student's Date of Birth \_\_\_\_\_

Attending \_\_\_\_\_ High School \_\_\_\_\_ College

Name of school now attending \_\_\_\_\_

Class Rank \_\_\_\_\_ Cumulative GPA \_\_\_\_\_

ACT/SAT Test Score(s) \_\_\_\_\_

Name of college or university you plan to attend \_\_\_\_\_

Proposed major in college \_\_\_\_\_

Name of college/university if currently enrolled \_\_\_\_\_

Cumulative GPA, if currently enrolled \_\_\_\_\_

Present year in college \_\_\_\_\_

Major(s) in college \_\_\_\_\_

High school name and year of graduation \_\_\_\_\_

## **ACTIVITIES**

**Attach resume or list of high school activities (college if applicable).**

**PERSONAL REFERENCE FOR:** \_\_\_\_\_  
**Student 's Name**

**This form is for your convenience (please type or use black ink), or you may wish to generate your letter on a computer. If using a computer form, please indicate that it is a *personal reference* and be sure to include student's name. Return to the CEA Office, 929 East Broad Street, Columbus, Ohio 43205, by 4:00 p.m., Friday, March 21, 2025.**

**Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Relationship to Applicant:** \_\_\_\_\_

**ACADEMIC REFERENCE FOR:** \_\_\_\_\_  
**Student's Name**

**This form is for your convenience (please type or use black ink), or you may wish to generate your letter on a computer. If using a computer form, please indicate that it is an *academic reference* and be sure to include student's name. Return to the CEA Office, 929 East Broad Street, Columbus, Ohio 43205, by 4:00 p.m., Friday, March 21, 2025.**

**Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Relationship to Applicant:** \_\_\_\_\_