

Galena Park Independent School District
14705 Woodforest Blvd
Houston, Texas 77015



Community Council PTA Career Development Scholarship Application

OFFICIAL RULES

In order to be eligible for this scholarship, applicants must complete the application in its entirety and email to Dr. Mechelle Epps, Assistant Superintendent for Student Support Services, by February 12, 2021 at 11:59 p.m.

All applicants must:

- Be a full-time employee of the Galena Park Independent School District
- Enroll in a college or university Fall 2021
- Join campus PTA on or before February 12, 2021

EMPLOYEE APPLICATION

LAST NAME	FIRST NAME	MIDDLE NAME
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STREET ADDRESS	CITY	ZIP	CELL PHONE #
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MARITAL STATUS (CHOOSE ONE)	SINGLE	MARRIED	DIVORCED	WIDOWED
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SPOUSE'S NAME (IF APPLICABLE)	OCCUPATION
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DEGREE(S) HELD	DEGREE/CERTIFICATE WORKING TOWARD
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NUMBER OF YEARS IN DISTRICT	CURRENT PRINCIPAL/SUPERVISOR
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FUTURE PLANS:

COLLEGE/UNIVERSITY ATTENDING	DESIRED MAJOR
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ESSAY REQUIREMENT: (no more than 2 pages, double spaced, 12-point Times New Roman font)

Please attach a brief summary explaining why you should receive the Community Council PTA Career Development Scholarship.

PERSONAL INCOME AND WORK EXPERIENCE:

Are you currently employed on another job?	YES If yes, where and how many hours per week?	NO
Are you related to a member of the GP Area Council PTA Executive Board?	YES	NO
Are you a member in good standing with your campus PTA?	YES	NO
If you do not remain in GPISD for the ensuing year, do you agree to repay the amount of the scholarship?	YES	NO

APPLICATION CHECKLIST:

This application for the scholarship becomes complete and valid only when you have submitted the following items by email:

_____ Employee Application

_____ Essay Requirement

Email your submission to:

Dr. Mechelle Epps, Assistant Superintendent for Student Support Services

SELECTION OF RECIPIENTS:

The PTA Scholarship Committee has the sole responsibility of selecting the recipients. All applications will be screened, and selected candidates will be contacted for an interview.

CERTIFICATION:

In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. Falsification of information will result in termination of any scholarship granted. Once submitted, this application becomes the sole property of Galena Park ISD.

ALL INFORMATION IS STRICTLY CONFIDENTIAL AND WILL ONLY BE USED FOR THE PURPOSE OF THIS SCHOLARSHIP

APPLICANT'S SIGNATURE _____ DATE _____