

# CITY COLLEGE OF SAN FRANCISCO

## TEACHER PREP CENTER

### Wells Fargo Foundation Future Math and Science Teachers

## SCHOLARSHIP APPLICATION March 5, 2010

**APPLICATION SUBMISSION DEADLINE:** March 5, 2010

**NOTE:** BE SURE TO COMPLY WITH DIRECTIONS ON THE FOLLOWING PAGE

Rating points will be deducted from incomplete applications

Request your unofficial transcript and courses-in-progress online

\_\_\_\_\_ Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_

Return Applications to:  
Scholarship Office  
Batmale 366

OR

Mail to:  
City College of San Francisco  
50 Phelan Ave., LB5  
San Francisco, CA 94112

**NOTE:** Be sure your application is computer generated or typed. To do so, you may:

- 1) Contact the Business Department Chair, Cloud 105, (239-3203) for access to available typewriters.
- 2) Five typewriters are available for student use in the Rosenberg Library. Call 452-5433 to reserve or sign up at the Circulation Desk on 4<sup>th</sup> floor. One-hour limitation.

**Check off the Completed Steps:**

- COMPLETE THE APPLICATION CHECKLIST PAGE:** Mark the box of the scholarship for which you are applying. Some Select Scholarships have additional application requirements. Verify that you have completed the additional requirements for these scholarships. Information is available on the Scholarship Listing, in the Scholarship Handbook, and on the application.
- OBTAIN LETTERS OF RECOMMENDATION**  
Please submit two current letters of recommendation from CCSF Math and or Science instructors who know you and are familiar with your class work and/or school and community activities. Letters should include information that will give the awarding committee insight into your personal qualities, character, special talents, academic attributes, and potential for making a contribution to society. Letters are to be on CCSF letterhead.
- PREPARE A PERSONAL STATEMENT**  
Please use two separate sheets. **Your statement format is: typed with one inch margins, top, bottom and sides; name and ID in the top right-hand corner; Times New Roman font; 12 point; double-spaced; two pages maximum.** Be sure to address all of the following items:
1. Please write about what is important to you, your educational and career goals, and the ways in which they are reflected in your accomplishments. Specifically give information about yourself, your family and background, your current activities, interests, employment, educational achievements, special needs, and financial circumstances.
  2. Please explain why you are interested in becoming a math/science teacher. Discuss your experience in the classroom that will contribute to your future success as a teacher. Explain how your interest in the field developed and describe any related work or volunteer experience. Include information about the steps you are taking to reach your goals.
  3. Please explain any excessive "W's" that appear on your transcript.
- In addition to content, personal statements are also evaluated on organization, creativity, and grammar.**
- UNOFFICIAL TRANSCRIPTS AND COURSES IN PROGRESS**  
Please submit an unofficial CCSF transcript and a print-out of your current courses-in-progress. **You may print these forms yourself by accessing the CCSF website.**
- SIGNATURE**
- REVIEW YOUR APPLICATION FOR COMPLETENESS**

Please read all questions carefully and answer them as completely as you can. Appearance and organization of your application and personal statement will be taken into consideration when judged by the Scholarship Committee; therefore, ALL APPLICATIONS ARE TO BE TYPED or PRINTED LEGIBLY

NAME: \_\_\_\_\_  
Last First MI

CCSF ID#: \_\_\_\_\_ BIRTH DATE: \_\_\_\_\_

CURRENT ADDRESS: \_\_\_\_\_  
Street Address or P.O. Box

\_\_\_\_\_ City County State Zip

HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

**EDUCATION**

HIGH SCHOOL ATTENDED: \_\_\_\_\_ DID YOU GRADUATE? \_\_\_\_\_

LOCATION: \_\_\_\_\_

WHAT OTHER COLLEGES HAVE YOU ATTENDED? \_\_\_\_\_

WHAT DEGREES DID YOU EARN? \_\_\_\_\_

NUMBER OF UNITS COMPLETED AT CCSF: \_\_\_\_\_ NUMBER OF UNITS IN PROGRESS AT CCSF: \_\_\_\_\_

DAY STUDENT: \_\_\_\_\_ EVENING STUDENT: \_\_\_\_\_ DAY/EVENING STUDENT: \_\_\_\_\_

CUMULATIVE G.P.A. AT CCSF: \_\_\_\_\_

HAVE YOU PASSED CBEST TEST? \_\_\_\_\_

DO YOU HAVE A VALID TEACHING CREDENTIAL? WHICH STATE OR COUNTRY? \_\_\_\_\_

WHEN DO YOU EXPECT TO FINISH YOUR STUDIES AT CCSF? Month \_\_\_\_\_ Year \_\_\_\_\_

\_\_\_\_\_ Last Name First Name  
IF YOU PLAN TO TRANSFER TO A FOUR-YEAR COLLEGE OR CREDENTIAL PROGRAM, AT WHICH SCHOOL DO YOU INTEND TO ENROLL?

**ACTIVITIES**

List Teacher Prep activities in which you have been active: (Supervised fieldwork, Teacher Club Participation  
Work experience in SFUSD schools

What college, community and high school awards or commendations have you received?

**EMPLOYMENT**

Have you worked with children or youth? \_\_\_\_\_

Are you presently employed? \_\_\_\_\_

?

EMPLOYER	POSITION	FROM	TO	

**NOTE:** To obtain maximum credit, you should describe the importance of your activities and/or employment in your personal statement.

ARE YOU A U.S. CITIZEN, U.S.  
NATIONAL OR U.S.  
PERMANENT RESIDENT?

AGE : \_\_\_\_\_ GENDER: \_\_\_\_\_ YES  NO

PLACE OF BIRTH: \_\_\_\_\_

MARITAL STATUS: \_\_\_\_\_ DO YOU HAVE CHILDREN? \_\_\_\_\_ THEIR AGES: \_\_\_\_\_

ETHNIC BACKGROUND : \_\_\_\_\_

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

**THE FOLLOWING SECTION IS OPTIONAL.** Even though this is an **OPTIONAL** section, the Scholarship Committee finds this information very helpful and encourages you to provide it for all scholarships. If you wish to be considered for one of several conditional scholarships in which the donors stipulate that the recipients meet certain conditions (e.g. financial need, ethnic background, gender, age, etc.) you must complete the applicable sections

VERIFIABLE DISABILITY: \_\_\_\_\_

DO YOU CONTRIBUTE TO THE SUPPORT OF OTHERS? \_\_\_\_\_

IF YES, WHAT IS THEIR RELATIONSHIP? \_\_\_\_\_

### HOUSEHOLD INCOME

My household's annual taxable income for 2009 was:

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> \$0 - \$13,965      | <input type="checkbox"/> \$23,506 - \$28,275 | <input type="checkbox"/> \$37,816 - \$42,585 |
| <input type="checkbox"/> \$13,966 - \$18,735 | <input type="checkbox"/> \$28,276 - \$33,045 | <input type="checkbox"/> \$42,856 - \$47,355 |
| <input type="checkbox"/> \$18,736 - \$23,505 | <input type="checkbox"/> \$33,046 - \$37,815 | <input type="checkbox"/> over \$47,356       |

How many people are being supported by this income? \_\_\_\_\_

**Your Individual Income**

Please give us any additional information that will assist us in evaluating your financial need. If you anticipate a reduction in income, please explain.

How do you plan to pay for your educational and living expenses for the coming year?

I hereby certify that the information provided above is given freely by me and is accurate to the best of my knowledge. I give permission to release this information to the CCSF Scholarship Committee and its designee(s). I understand that information involving current abuse and/or threats of violence must be reported to the Dean of Students as required by law.

SIGNATURE:

DATE:

\_\_\_\_\_

\_\_\_\_\_

**NOTE: THE DECISION OF THE WELLS FARGO FOUNDATION SCHOLARSHIP COMMITTEE IS FINAL.**