2020 SCHOLARSHIP APPLICATION CALIFORNIA RETIRED TEACHERS ASSOCIATION Scholarship Foundation of San Joaquin Division 20

All items must be completed. Incomplete applications will not be considered. Attach a copy of:

- (1) Your official high school transcript
- (2) Two letters of recommendation (one from your academic teacher)
- (3) Autobiographical essay

Name	U.S. Cit	U.S. Citizen Yes No	
Address	City	State	Zip
Land phone or cell phone			
Date of birth	High School	ol	
Father's name and occupation			
Mother's name and occupation			
Number of brothers/sisters receiving par	rental support		
Vocational Goal	Must be in the field	of education to q	ualify for scholarship
What degree do you plan to obtain: B.A	B.S	M.A Oth	er
Name and address of college/university	you plan to attend:		
What percentage of financial need will p	arents provide?		
What percentage of financial need will y	ou provide?		
List jobs and employers for whom you h	ave worked during the	past two years.	
Describe any unusual family or personal	I financial obligations (or situation:	
Please list on a separate sheet: Special school recognition or awards			
Club membership and offices held. Inc	_		
School activities and community and cl	hurch activities		

COMPLETE, AND SUBMIT TO HIGH SCHOOL COUNSELOR BY FEBRUARY 21, 2020