

**RENSELAER COUNTY RETIRED TEACHERS' ASSOCIATION
2024 EDUCATION SCHOLARSHIP APPLICATION**

NAME: _____

Address: _____

Phone: _____ **e mail:** _____

HIGH SCHOOL: _____

Address: _____

Counselor: _____

Contact Info: _____

COLLEGE CHOICE:

1st: _____

2nd: _____

3rd: _____

EDUCATION MAJOR: _____

GRADE LEVEL(s): _____

Have you applied for any other scholarships? _____

If, yes, please list: _____

PRINT names of 3 people(NON-RELATIVES) who have agreed to recommend you.

- | | |
|----------|---------------------------|
| 1. _____ | Secondary Teacher |
| 2. _____ | Guidance Counselor |
| 3. _____ | Applicant's Choice |

The attached application and essay have been prepared by me.

Applicant's Signature _____ **Date:** _____