



Wisconsin Head Start Association Staff Affiliate Scholarship



STAFF AFFILIATE SCHOLARSHIP

The Staff Affiliate Scholarship is an annual scholarship made available from funds raised throughout the year by the WHSA Staff Affiliate members. The Staff Affiliate would also like to give special recognition to Lakeshore Learning Materials for their generous donation during the WHSA Annual Conference. Their generosity and support of this scholarship fund-raising raffle continues to help make this scholarship possible.

WHO IS ELIGIBLE? The Staff Affiliate Scholarship will be awarded to a current Head Start employee, employed by Head Start for at least one year from date of his/ her hire.

AMOUNT OF SCHOLARSHIP: The scholarship award is \$400. The award can be requested for an advanced education, recertification, professional development and/or related educational expenses. Several awards will be made in 2018. Attendance at the Awards Ceremony at the Fall Quarterly event is strongly encouraged.

ATTACH AT LEAST TWO LETTERS OF RECOMMENDATION

- One letter of recommendation should be from your current supervisor.
- The other letter of recommendation may be from a colleague of your choice – i.e. professor, mentor, or Head Start staff member.

Recommendation letters for WHSA scholarship applicants should address the following areas:

- Personal or professional achievements of the applicant
- The applicants educational and career goals
- Head Start and community involvement
- Financial need of the applicant
- Any special needs or circumstances

Application must be **SIGNED BY HS/EHS PROGRAM DIRECTOR** and received at the WHSA office by **Friday MARCH 30, 2018** to be eligible for consideration.

Mail or email to:

Wisconsin Head Start Association Scholarship

5250 E. Terrace Dr. Suite 110-D, Madison, WI 53718
Phone: 608-442-6879 WHSAssist@whsaonline.org



WISCONSIN HEAD START ASSOCIATION 2018 APPLICATION FOR STAFF SCHOLARSHIP

Each applicant is eligible to receive only one scholarship. Please answer each question as thoroughly as possible.

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|--|------------|---------------------|-------------------|--------------------|---------------|----------------------|
| First Name: | | Last Name: | | | | |
| Home Address: | | | | | | |
| City/State: | | Zip: | | | | |
| Phone #: | | Email: | | | | |
| Grantee Name: | | | | | | |
| Grantee Address: | | | | | | |
| Grantee City/State: | | Grantee Zip: | | | | |
| Grantee Phone | | | | | | |
| Program Director Name: | | | | | | |
| Position(s) in Head Start: | | | | # of Years: | | |
| Date of Hire: | | | | | | |
| Circle all that apply: | Credential | Conference | Professional Dev. | College coursework | Certification | Educational Expenses |
| Name of accredited institution, conference, or training you plan to attend: | | | | | | |
| Were or are you a Head Start parent? | | | | YES | NO | |
| Were you a former Head Start Child? | | | | YES | NO | |
| Were you a recipient of a WHSA Staff Affiliate scholarship last year? | | | | YES | NO | |

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| Describe your education and career goals. |
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How would this scholarship help you achieve these goals?

How are you involved in Head Start and your community (i.e. board/community involvement, positions held, etc.)?

What makes you passionate about your work with Head Start?

Describe any financial, personal barriers, or challenges that you have to achieving your educational goals.

Signature of Applicant (Required)

Date

Signature of HS/EHS Program Director (Required)

Date