

# Charles McDaniel Teacher Scholarship

## Nomination Form for the 2009-2010 Academic Year

### General Information

The purpose of the Charles McDaniel Teacher Scholarship Program is to recognize and financially assist outstanding college Junior or Senior level students who were Georgia public high school graduates and are now pursuing teaching degrees at public colleges or universities in Georgia. This scholarship was established by the friends and family of Dr. Charles McDaniel in honor of his contributions as State Superintendent of Schools for the State of Georgia. The program is administered by the Georgia Student Finance Commission.

The number of initial and or renewal scholarship awards that may be made in any year, and the dollar amount of each award made, is dependent upon funds available at the time from the Charles McDaniel Teacher Scholarship Fund. The award may not exceed the cost of tuition and fees. This scholarship is in the form of a non-repayable grant. The Department of Education Chairman or Designee at each of the Georgia public colleges and universities that offer teaching degrees may nominate one student each year. From this pool of nominees, the Georgia Student Finance Commission will select the recipient.

### Eligibility Requirements

Each nominee must:

1. Be a legal resident of Georgia and a graduate of a **public** high school in Georgia;
2. Be enrolled in or accepted for enrollment as a full-time student in the College or Department of Education within a public college or university in Georgia and classified as a **Junior** or **Senior** level student;
3. Have attained a cumulative college grade point average, at the time of entrance into the College or Department of Education, of at least **3.25** based on a 4.0 scale;
4. Not have been dismissed from any postsecondary school for disciplinary reasons, and not have been convicted of a felony nor charged with a felony, unless the felony was dismissed or he or she was acquitted;
5. Be working towards an initial Baccalaureate degree;
6. Indicate a strong desire to pursue teaching as a career at the elementary or secondary level;
7. Be in compliance with federal Selective Service registration requirements; and
8. Not owe a refund on a grant or scholarship administered by the Georgia Student Finance Commission nor be in default on any loan guaranteed by the Georgia Higher Education Assistance Corporation.

### Nomination Procedure

This Nomination Form must be completed and received by the Georgia Student Finance Commission by **September 15, 2009** to be considered for the 2009-2010 academic year.

**Instructions: Step 1** - The Education Department Chairman or Designee identifies eligible students and selects one student for nomination.

**Step 2** - The Nominee answers all of the questions in PART A of this form.

**Step 3** - The Nominee writes an essay in PART B as instructed.

**Step 4** - The Financial Aid Officer completes PART C of this form.

**Step 5** - The Education Department Chairman or Designee officially nominates the student by completing PART D.

**Step 6** - The Education Department Chairman or Designee mails the completed Nomination Form directly to the Georgia Student Finance Commission.

#### Key for Completing Item 14

**Nominee:** Please use the Key below to indicate your Selective Service status in completing Item 14 in PART A.

Code	Status/Reason	Code	Status/Reason
1	I have registered with the Selective Service.	5	I was born before 1960.
I have <b>not</b> registered with the Selective Service because:		6	I am a citizen of the Federated States of Micronesia, or the Marshall Islands, or a permanent resident of the Trust Territory of the Pacific Islands (Palau).
2	I am female.	7	I have not registered with the Selective Service because of a reason not named above.
3	I am in the Armed Services on active duty. (Note: Members of the Reserves and National Guard are not considered on active duty.)		
4	I have not reached my 18th birthday.		



## **PART B: To be completed by NOMINEE**

24. In the space provided below, please write an essay discussing your professional goals and your reasons for pursuing a teaching career at the elementary or secondary level. You should also discuss your accomplishments, experiences, and honors received that may relate to teaching.

## PART C: To be completed by the FINANCIAL AID OFFICER

25. Name of College or University

26. Requested Award Amount:

Will awarding of this scholarship exceed the student cost of attendance? \_\_\_\_\_ Yes \_\_\_\_\_ No

List the dollar amount of the award per the students request on Part A, number 23.

\_\_\_\_\_ Summer \_\_\_\_\_ Fall \_\_\_\_\_ Spring

27. If this student filed a need analysis form, enter the amount of Expected Family Contribution for the school terms indicated in Item 21:

\$ \_\_\_\_\_

### FINANCIAL AID OFFICER CERTIFICATION

I certify that the information above is true and correct to the best of my knowledge and belief. This student (a) is accepted for enrollment or enrolled as a full-time student; (b) is making satisfactory academic progress as determined by the college; (c) is or will be a legal resident of Georgia for at least 12 months immediately prior to registration for the first school term indicated in Item 21; (d) is not in obligated to pay a refund on a grant or scholarship administered by the Georgia Student Finance Commission; and (e) is not in default on any loan guaranteed by the Georgia Higher Education Assistance Corporation.

28. \_\_\_\_\_

Financial Aid Officer's Signature

\_\_\_\_\_

Date Signed

## PART D: To be completed by the EDUCATION DEPARTMENT CHAIRMAN

29. Name of College or University

30. Is this student enrolled or accepted for enrollment in the College, School, Division, or Department of Education within this institution?

A. \_\_\_ Yes B. \_\_\_ No

31. Student's actual or anticipated academic grade level as of the beginning of the first term indicated in Item 21:

A. \_\_\_ 3<sup>rd</sup> year B. \_\_\_ 4<sup>th</sup> year

32. Student's cumulative grade point average on a 4.0 scale at the time of admission to the teacher education program:

\_\_\_\_\_

33. Has this student obtained a Baccalaureate degree from this or any other institution?

A. \_\_\_ Yes B. \_\_\_ No

34. Has this student been dismissed at any time by any college or university for disciplinary reasons?

A. \_\_\_ Yes B. \_\_\_ No

### EDUCATION DEPARTMENT CHAIRMAN CERTIFICATION AND NOMINATION

I certify that the information above is true and correct to the best of my knowledge and belief. I understand that this institution may nominate one student to be considered for the Charles McDaniel Teacher Scholarship and that the nominee must meet all of the eligibility requirements.

I hereby nominate \_\_\_\_\_ for the Charles McDaniel Teacher Scholarship for the 2005-2006 academic year.

Nominee's Name

35. \_\_\_\_\_

Education Department Chairman or Designee's Signature

\_\_\_\_\_

Date Signed

**Photocopy for your file if desired; then forward to: Georgia Student Finance Commission  
2082 East Exchange Place, Suite 100  
Tucker GA 30084**

#### Contact GSFC:

770-724-9000  
1-800-505-GSFC (4732)  
Fax: 770-724-9225