

ROSIE BAKER SCHOLARSHIP APPLICATION

Purpose of Scholarship: To encourage eligible WCCAA members to pursue educational opportunities to enhance their present or future job responsibilities and career opportunities in Early Care and Education. The Scholarship funds could cover the cost of training or class up to \$500 in a calendar year, not to exceed \$1,000 in a three-year period. Scholarships will be approved as budget allow. Scholarship will not include travel, mileage or housing.

Eligibility: Must be a WCCAA current member for at least one year before applying for a scholarship.
 You may apply for only one scholarship per year.
 Must apply prior to the event or training.
 Application must be completed **IN FULL** to qualify.
 All required materials **MUST** be submitted with the application.

SECTION 1 - APPLICANT INFORMATION

Name:		
Home phone:	Cell Phone:	Work Phone:
Home address:		
City:	State:	ZIP Code:
Place of Employment and Title:		
City:	State:	Zip Code:
WCCAA Membership ID:	Region (1-9):	
Have you received the Rosie Baker Scholarship in the past? NO <input type="checkbox"/> YES <input type="checkbox"/> If yes what years did you receive it? _____		
If so, please share when you received the scholarship, and how it benefited you and your community, region and or WCCAA. (Attach a separate paragraph/statement)		

SECTION 2

CONFERENCE TRAINING COURSE EVENT (EXPLAIN) _____

Title (include adequate documentation):	
Location:	State:
Date(s):	Cost:
Amount Requested:	
Have you already registered for this event: Yes <input type="checkbox"/> No <input type="checkbox"/> If no, please attach an explanation.	
If so, reimbursement made payable to:	

SECTION 3 - SCHOLARSHIP REQUIREMENTS

- Please submit as separate attachment the following:
- Current resume
 - Brief description for purpose of attending this event and how it will benefit you, your center and the community
 - Adequate documentation for the cost of the event
 - Any additional documentation for prior scholarship recipients

SECTION 4 - APPLICANT AGREEMENT

- Within 30 days of completion of event, I agree to submit a short summary on how this event has helped me in the field of Early Care and Education to the committee chair. This will be posted on facebook, the WCCAA website and posted at conference with my name and photo listed.
- I understand the payment of my scholarship will be submitted directly to the agency or person that made the payment, upon submission of proof of payment, proof of the completion of the event and the short summary with photo.

SECTION 5 - ADDITIONAL INFORMATION

- Applicants must submit all required documentation to the scholarship chair on or before the deadline of each scholarship opportunity.
 Email to: rforrest@uwsp.edu
 Mail to: RoxAnne Forrest, Children's Learning Center, 910 Fremont St., Stevens Point, WI 54481

Signature of applicant	Date
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