

ILLINOIS RETIRED TEACHERS ASSOCIATION FOUNDATION SCHOLARSHIP

1. GENERAL INFORMATION

- A. The scholarship will be awarded to one full-time student each academic year for each IRTA Foundation area.
- B. The scholarship recipient shall receive a grant of \$1,000 each for fall and spring semesters, totaling \$2,000 for the year, to be used for educational expenses.
- C. If for any reason the recipient does not conform to any or all policies, the IRTA Foundation Board has the right to revoke the scholarship.
- D. All applications must be postmarked/emailed on or before **March 7**, *prior* to the applicant's junior or senior year in college, and mailed or emailed to the office of the IRTA Foundation. Recipients will be notified by April 21 of that same year.
- E. The applicant must be an incoming Junior or Senior in college.

2. ELIGIBILITY

- A. An application must be postmarked or emailed no later than March 7 and mailed or emailed to the IRTA office. The applicant must be entering their **junior or senior year in college**. The student must be accepted into a Teacher Certification Program in order to receive IRTA Foundation Scholarship funding.
- B. Applicants must be a resident of Illinois or have graduated from an Illinois high school.
- C. Applicants may attend school in any state as long as the school attended maintains an accredited Teacher Training program.
- D. Applicants must have and maintain at least a 3.0 GPA on a 4.0 scale.
- E. The recipient must furnish a copy of the university or college official transcript prior to receiving funds.

3. APPLICATION PROCEDURE

- A. Each applicant must complete an application provided by the IRTA Foundation.
- B. The applicant must submit a **One page** (double spaced) personal statement and reason(s) for applying for the scholarship.
- C. Three letters of recommendation, from other than family members, must accompany the application. Please include name of reference, applicant's relationship to the reference, and a means of contacting the reference.
- D. An official transcript from all colleges attended by the student must accompany the application.
- E. Each applicant must sign a Consent to Release Information form authorizing the IRTA Foundation to verify the accuracy of all information and documentation submitted with the scholarship application.
- F. Verification of acceptance in a Teacher Education Program. (If a Community College student, a letter of acceptance from the University or University class schedule with course of study indicated.) (If a University student, school of study must be on the official transcript.)

Inquiries or questions, please contact Susan Goetz at the Illinois Retired Teachers Association Foundation, 828 S Second St, Springfield, IL 62704, 1-800-728-4782 or email susan@irtaonline.org.

**ILLINOIS RETIRED TEACHERS ASSOCIATION
FOUNDATION, INC.**
APPLICATION FOR IRTA FOUNDATION SCHOLARSHIP
2025

PERSONAL DATA

Applicant's name: (Last) _____ (First) _____ (Middle) _____

Address: _____

(City) _____ (State) _____ (Zip) _____

Home Phone: () _____ Cell Phone:() _____

Email: _____

If not an Illinois resident, high school graduated from: _____

Marital Status of applicant:

_____ Single _____ Married _____ Separated _____ Widowed _____ Divorced

Information requested below is for applicant's parents or spouse if applicant lives with or is financially dependent on parents or spouse for support. Independent applicants should list personal information. The Foundation reserves the right to request copies of income tax returns.

Number in Household: _____ Number of Dependent Children: _____ Number in college _____

Total taxable household income from previous tax year (check one):

___0 - \$20,000 ___\$20,001 - \$30,000 ___\$30,000 - \$40,000 ___\$40,001 - \$50,000 ___Over \$50,000

Please specify each source of this income. (If needed, please use a separate sheet of paper.)
Please indicate all non-taxable income received or expected to receive (source and amount). Examples include JPTA assistance, welfare assistance, educational social security or veteran's educational benefits.

I certify that the above information is true and correct to the best of my knowledge.

STUDENT'S SIGNATURE

DATE

SIGNATURE OF PARENT OR SPOUSE IF STUDENT IS A DEPENDENT (PLEASE CIRCLE ONE)

DATE

ACADEMIC INFORMATION

Previous college attendance

Name of Institution and Dates attended: _____

Institution attending in 2025-2026: _____

Year of Graduation(ex. Spring 2027): _____

TRANSCRIPTS FROM ALL COLLEGES MUST ACCOMPANY THIS APPLICATION

Note: Be sure to include the following: (1) Three letters of recommendation (not from family members), (2) **One page** (double spaced) personal statement and reason(s) for applying for scholarship, (3) All official college transcripts, (4) Form giving Consent to Release Information, (5) Verification of acceptance in a Teacher Education Program (if transferring from a Community College).

Postmarked or email on/before March 7, 2025 to: IRTA Foundation, 828 S Second St, Springfield, IL 62704
Attention: Susan Goetz
(217) 523-8488 (800) 728-4782 susan@irtaonline.org

CONSENT TO RELEASE INFORMATION

I, _____, give Consent for the Illinois
NAME OF APPLICANT

Retired Teachers Association Foundation to verify my application information if necessary. I also consent that the IRTA Foundation use my photograph and announce my award-winning in the media if I am a recipient of an IRTA Foundation Scholarship

APPLICANT SIGNATURE

DATE