



Mark David Sheive Memorial Scholarship

DUE: Friday, May 29, 2009 by 5:00 p.m.

Scholarship Information

The Mark David Sheive Memorial Scholarship Endowment is funded through gifts from family and friends of Mark David Sheive, an HSU Liberal Studies/Elementary Education alumnus. Preference will be given to candidates who have received a baccalaureate from HSU in an approved major(s) leading to an Elementary Education (Multiple Subjects) credential, though Candidates who received a baccalaureate from other universities and colleges may also apply.

One scholarship will be awarded annually. The total annual award is \$1500; \$750 is dispersed for each semester, fall and spring, of the credential year.

Eligibility Criteria

Applicants must meet the following eligibility criteria:

- U.S. citizenship
- Minimum grade-point average to enter the credential program (currently 2.67 GPA on a 4.0 scale or 2.75 GPA based on the last 60 semester units).
- Preference is given to those with a baccalaureate degree in Liberal Studies/Elementary Education or Child Development/Elementary Education from HSU.
- Met all of the application requirements for enrollment in the Elementary Education credential program. Awarding of the scholarship is contingent on the applicant's placement in a Multiple Subjects fieldwork classroom.
- Application for financial aid filed with the Financial Aid Office. Financial eligibility, as determined by the Financial Aid Office using federal and state guidelines, may be taken into consideration.

Application Process

A. In addition to having submitted the necessary applications to be accepted as an EED Credential Candidate (an application for graduate admission to HSU Enrollment Management Office and an application to the Credential Programs Office), **applicants must apply for financial aid**. Applications are available in the Financial Aid Office, Student and Business Services Building.

B. Applicants must mail or deliver the following items to:

Sheive Memorial Scholarship Committee
School of Education, Attn: Kristin Mack
HGH 202
Humboldt State University
Arcata, CA 95521

1. The financial information release form, **signed** (attached form which authorizes release of your financial information to the scholarship committee and/or donor)
2. The press release form, **signed** (attached form which authorizes HSU to release information you provide in this application to the press; this does not include the release of financial information)

3. Three (3) letters of recommendation from faculty members, academic advisors or persons qualified to evaluate your potential in the classroom, of which at least one (1) letter must be from a qualified person with direct observation of you in the classroom.

(Please note: Letters cannot be written by a member of the scholarship selection committee. If appropriate, you may choose to use one or more of the letters of recommendation you have submitted in your Elementary Education application packet.)

4. A letter you have written describing your personal characteristics and desire to be a teacher, including your commitment to encouraging young people to learn and your commitment to lifelong learning. (You may use your Professional Goal Statement for this if you so choose.)

Selection Process

A scholarship committee within the School of Education will review candidate applications in consultation with the Financial Aid Office. Applicants will be notified via mail of the results.

Awarding Procedure

Applications are due Friday, May 29, 2009 by 5:00 p.m. The scholarship will be disbursed in two portions (fall and spring of credential year). The spring (second) portion will be awarded only if the student maintains the minimum GPA.

If you are selected as the recipient of the Sheive Memorial Scholarship, please submit a letter of acknowledgement to be forwarded to the scholarship's donors.

Stipulations

- The scholarship will be awarded annually only if there is a qualified applicant.
- The scholarship must be used in the year and semester awarded.



Mark David Sheive Memorial Scholarship

PRESS RELEASE FORM

Applicant Name _____ Student ID No. _____

Address: _____ Phone: _____

I certify the application information I have supplied is true and correct to the best of my knowledge.

_____ Date: _____

(Signature)

If selected, I authorize the University to utilize information I have provided in the application, excluding financial information, for press releases.

_____ Date: _____

(Signature)

FINANCIAL AID INFORMATION RELEASE FORM

I authorize the release of personal information from my financial aid file to the Mark David Sheive Memorial Scholarship donor(s) and selection committee members for selection purposes.

Signature

Date

Print Name