



A Union of Professionals

# Robert G. Porter Scholars Program

American Federation  
of Teachers, AFL-CIO

555 New Jersey Ave. N.W.  
Washington, DC 20001  
202/879-4400  
www.aft.org

## 2009 Four-Year \$8,000 Postsecondary Scholarship Application

Randi Weingarten  
PRESIDENT

Antonia Cortese  
SECRETARY-TREASURER

Lorretta Johnson  
EXECUTIVE VICE PRESIDENT

### PROGRAM ELIGIBILITY

**You must be:**

- A graduating high school senior; and
- The dependent of a current AFT member (who has been a member for at least one year).

**Dependents of full- or part-time AFT national, state or local staff may NOT apply.**

This form should be completed and returned to:

**Robert G. Porter Scholars Program, 555 New Jersey Ave. N.W., Washington, DC 20001-2079**

This application must be postmarked no later than **March 31, 2009.**

## I. FAMILY AND BACKGROUND INFORMATION

PLEASE TYPE OR PRINT NEATLY.

### A. APPLICANT DATA

APPLICANT'S NAME

ADDRESS

CITY

STATE

ZIP CODE

TELEPHONE

E-MAIL

DATE OF BIRTH

### B. UNION PARENT/GUARDIAN DATA

UNION PARENT'S OR GUARDIAN'S NAME

EMPLOYER

My parent     My legal guardian

is a member of AFT local:\*

LOCAL NAME AND NUMBER

CITY

STATE

PARENT/GUARDIAN E-MAIL ADDRESS

**\*NOTE: Membership will be verified by contacting your parent's or guardian's local.**

**NOTE: This application must be complete, and directions must be followed. Failure to do so will result in your disqualification. For continuing scholarship qualification, recipients are expected to maintain a minimum cumulative GPA of 2.75, as reflected in the annual transcript required, and must show continuing enrollment and satisfactory progress toward a degree. Your degree is expected to be completed within six years.**

## II. EDUCATION BACKGROUND AND FUTURE EDUCATION PLANS

**A. SECONDARY SCHOOL ATTENDED:**

NAME OF SCHOOL \_\_\_\_\_

LOCATION \_\_\_\_\_

YEAR OF HIGH SCHOOL GRADUATION \_\_\_\_\_

**C. COLLEGE/UNIVERSITY IN WHICH YOU CURRENTLY PLAN TO ENROLL:\***

NAME OF SCHOOL \_\_\_\_\_

CITY \_\_\_\_\_

STATE \_\_\_\_\_

**B. AREA OF STUDY IN WHICH YOU PLAN TO SPECIALIZE IN COLLEGE:**

\_\_\_\_\_  
\_\_\_\_\_

**D. WHAT IS YOUR PROBABLE CAREER CHOICE?**

\_\_\_\_\_  
\_\_\_\_\_

## III. SCHOOL-RELATED ACTIVITIES

List three school-related activities and explain why they are the most significant to you. (Attach **separate sheet**, if necessary.)

## IV. COMMUNITY SERVICES

Explain one of the community activities in which you have been involved. How did it change you and the people you served? (Attach **separate sheet**, if necessary.)

\* If your choice of college or university changes, please notify the AFT Robert G. Porter Scholars Program at 800/238-1133, ext. 4481.

## V. LEADERSHIP

Explain what you would consider your most important leadership role in high school. How long were you in this role? What did the work include? What impact did it have on you, those who interacted with you, and those who were served by the activity? What did you learn in the process? (Attach a **separate sheet**.)

## VI. WORK EXPERIENCE

List jobs you held (including volunteer activities) during high school. Include the work performed, dates employed or volunteered, average hours worked. (Attach a **separate sheet**.)

## VII. RECOMMENDATIONS

Submit at least two letters of recommendation. One must be from a teacher or counselor; one must be from a community representative, such as a minister, rabbi, priest, scout leader, employer or community service organization representative. All letters of recommendation should be written on official letterhead when possible.

## VIII. PERSONAL STATEMENT

Describe how this scholarship will enable you to attend the college of your choice. (Attach a **separate sheet**.)

## IX. ESSAY

On a **separate sheet**, write an essay of no more than 500 words that considers the following:

We face very serious challenges—the financial crisis, the deepening recession—and their destructive consequences. Faced with declining tax revenues, state and local governments are cutting back on the most essential services. Please address the resulting threats to education, health-care and other services to the public. Give your perspective

on what should be done to deal with this current economic crisis and still maintain quality public services.

Support your answer with research, and footnote your sources. Here are some information sources that may help to inform your response:

AFT president Randi Weingarten addresses the need to grow our economy by investing in a well-educated, well-prepared workforce: [www.aft.org/news/2008/NPC\\_speech.htm](http://www.aft.org/news/2008/NPC_speech.htm).

AFT president Randi Weingarten's testimony before Congress (Oct. 29, 2008) on the need to invest in jobs, education and healthcare as part of the federal response to current economic difficulties: [www.aft.org/news/2008/congress\\_102909.htm](http://www.aft.org/news/2008/congress_102909.htm).

### Other sites:

Center on Budget and Policy Priorities  
[www.cbpp.org/](http://www.cbpp.org/)

Economic Policy Institute  
[www.epi.org](http://www.epi.org)

Center for American Progress  
[www.americanprogress.org](http://www.americanprogress.org)

The Center for Economic & Policy Research at [www.cepr.net](http://www.cepr.net), including:  
[www.cepr.net/index.php/op-eds-&-columns/op-eds-&-columns/health-care-as-stimulus:-the-best-way-to-spend-big-bucks/](http://www.cepr.net/index.php/op-eds-&-columns/op-eds-&-columns/health-care-as-stimulus:-the-best-way-to-spend-big-bucks/)

Your essay will be judged on the following criteria:

1. Strength of argument;
2. Ideas and content;
3. Organization and clarity of expression; and
4. Sources of information used (and cited).

**NOTE: Essay must be typed.**

**All essays become AFT property, and the AFT reserves the right to excerpt from your essay for publication.**

## SIGNATURES AND APPLICATION CHECKLIST

I hereby certify that all information provided in this application is complete and correct.

### Signature of applicant:

\_\_\_\_\_  
APPLICANT SIGNATURE

DATE \_\_\_\_\_

Signature of parent or legal guardian who is an AFT member:

\_\_\_\_\_  
PARENT/GUARDIAN SIGNATURE

DATE \_\_\_\_\_

### BEFORE MAILING, CHECK TO MAKE SURE:

- The application is completely filled out.
- Your parent or guardian who is a member of the AFT has signed the form.
- You have signed the Authorization for Release of Information form to release your secondary school transcript.
- Your parent or guardian has signed the Authorization for Release of Information form.
- The Secondary School Report is signed by a school official.
- You have signed the form certifying that the information provided is true and correct.
- You have included letters of recommendation with this application.
- You have included your **official** transcript.

# SECONDARY SCHOOL REPORT

## AUTHORIZATION FOR RELEASE OF INFORMATION

*Under the Family Educational Rights and Privacy Act of 1974, a school must have signed authorization before releasing information about a student. Both student and parent or legal guardian should sign and date this authorization.*

*Permission is hereby given to school officials to release the secondary school record and other requested information to the Robert G. Porter Scholars Program for consideration for possible financial aid.*

### Student signature:

\_\_\_\_\_  
PRINT FULL NAME

\_\_\_\_\_  
SIGNATURE

DATE \_\_\_\_\_

### Parent or legal guardian's signature:

\_\_\_\_\_  
PRINT FULL NAME

\_\_\_\_\_  
SIGNATURE

DATE \_\_\_\_\_

## APPLICANT TESTING

### AMERICAN COLLEGE TEST (ACT) SCORES

DATE TESTED \_\_\_\_\_

COMPOSITE \_\_\_\_\_

### SCHOLASTIC ASSESSMENT TEST (SAT) SCORES

DATE TESTED \_\_\_\_\_

CRITICAL READING \_\_\_\_\_

MATH \_\_\_\_\_

WRITING \_\_\_\_\_

TOTAL \_\_\_\_\_

You may show the highest scores from different dates if it is to the applicant's advantage.

## ADDITIONAL SCHOOL PROGRAM INFORMATION

Grade point average at the end of the last academic year or through the first semester of the current academic year, whichever is higher: \_\_\_\_\_

Please describe any advanced placement (AP) or International Baccalaureate Program classes that you may have completed. If not applicable, please write "N/A." Attach a **separate sheet**, if necessary.

### NOTE TO SECONDARY SCHOOL PRINCIPAL OR GUIDANCE COUNSELOR:

The above student is applying for a scholarship through the Robert G. Porter Scholars Program. We ask your cooperation in completing the Secondary School Report.

Please complete this page as accurately as possible. Sections left incomplete will limit the Robert G. Porter Scholars Program Committee's ability to adequately evaluate the applicant.

The above information is, to the best of my knowledge, true and accurate based on facts found in the official record. (Additional comments may be provided to the Robert G. Porter Scholars Program Committee in an accompanying letter typed on school letterhead.)

NAME \_\_\_\_\_

TITLE \_\_\_\_\_

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_