

**WASHINGTON EDUCATION ASSOCIATION-RETIRED  
SCHOLARSHIP APPLICATION FORM FOR**

Certificated WEA members, ESP (Classified) members or Student WEA members (SWEA)

Please use this form as a cover sheet for your letter of application.

**Applications must be received by April 10, 2019**

Name \_\_\_\_\_ WEA Member number \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ WA Zip Code \_\_\_\_\_

Home phone: ( ) \_\_\_\_\_ Work phone: ( ) \_\_\_\_\_ Email \_\_\_\_\_

Certificated and Classified candidates: Current assignment \_\_\_\_\_

SWEA candidates: Work in public education you plan to pursue \_\_\_\_\_

How did you learn about this scholarship? \_\_\_\_\_

Name of local association or UniServ Council

Name \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ WA Zip Code \_\_\_\_\_

Your local association president's name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ WA Zip Code \_\_\_\_\_

Home phone ( ) \_\_\_\_\_ Work phone ( ) \_\_\_\_\_ Email \_\_\_\_\_

Two recommendations from the field of education. Submit a letter of recommendation from one of them.

Name \_\_\_\_\_ Position \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ WA Zip Code \_\_\_\_\_

Home phone ( ) \_\_\_\_\_ Work phone ( ) \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Position \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ WA Zip Code \_\_\_\_\_

Home phone ( ) \_\_\_\_\_ Work phone ( ) \_\_\_\_\_ Email \_\_\_\_\_