

South Carolina Council of Teachers of Mathematics



Scholarship Program

The SCCTM Scholarship Program provides financial assistance of \$1,500 to deserving preservice teachers who express their intention to specialize in the teaching of mathematics. Up to three scholarships will be awarded each year depending upon the availability of funds.

Requirements for Eligibility

The student must:

1. be enrolled in student teaching within one academic year of scholarship application at a South Carolina college or university that is approved by the South Carolina Department of Education to prepare to teach in pre-kindergarten through Grade 12;
2. be committed to mathematics teaching in grades PK – 12 in South Carolina;
3. have a cumulative grade point average of 3.0 or equivalent;
4. have a cumulative grade point average of 3.0 or equivalent for all mathematics courses with a minimum of twelve semester hours of mathematics taken;
5. submit each of the following:
 - a. a completed application (form attached);
 - b. two (2) one-page, typed letters of recommendation from college/university faculty members or other educators;
 - c. a verification of student teaching from the college or university coordinator confirming the term of student teaching (form attached);
 - d. an official college transcript (graduate students submit official undergraduate and graduate transcripts);
 - e. a statement of 100 words or less that indicates the student's commitment to teaching mathematics;
 - f. an example of a lesson that you have taught or would teach that highlights your teaching ability;

Mail the items listed in #5 on or before **September 15** to **Gina Dunn, SCCTM Scholarship Committee Chair, Department of Mathematics and Computing, 320 Stanley Ave., Greenwood, SC 29649.**



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Scholarship Application

PRINT or **TYPE** (use the back or attach additional sheets, if necessary).

1. Name _____

2. Name of College or University _____

3. Social Security Number _____

4. Home Address _____

Home Telephone _____

5. School Address _____

School Telephone _____

6. Expected Graduation Date _____

7. List service and/or professional organizations to which you belong.

8. List your leadership and/or community service activities.



9. List honors and awards that you have received.

10. List any other scholarships that you now hold.

11. List two college/university faculty members or other educators who will submit one page, typed letters of recommendation for you.

1. _____ 2. _____

12. Attach a statement of 100 words or less that indicates your commitment to teaching mathematics.

13. Attach an example of a lesson that you have taught or would teach that highlights your teaching ability.

Signature: _____ Date: _____



Verification of Student Teaching

I verify that _____ has applied for student teaching and, to the best of my knowledge, will student teach during the Fall 20____ or Spring 20____ term.

Coordinator of Student Teaching:

Name: _____

Title: _____

Address: _____

Signature: _____

Date: _____