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# ALABAMA EDUCATION RETIREES FOUNDATION, INC.

828 Washington Avenue • Montgomery, Alabama 36104 • 1-800-537-6867

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## ELEMENTARY/SECONDARY/POSTSECONDARY EDUCATION SCHOLARSHIP PROGRAM

*TEN \$2,000 SCHOLARSHIPS WILL BE AWARDED*

# 2021 APPLICATION

*To be completed by applicant and postmarked, faxed, or hand delivered by  
4 p.m. March 5, 2021*

Please provide all requested information. Application must be typed or printed legibly.

1. Name \_\_\_\_\_ Last four digits of your SSN \_\_\_\_\_
2. Mailing Address \_\_\_\_\_ Email Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
3. Home phone \_\_\_\_\_ Business phone \_\_\_\_\_
4. School where currently employed \_\_\_\_\_  
School System \_\_\_\_\_ County \_\_\_\_\_  
Address of school \_\_\_\_\_
5. Current Position \_\_\_\_\_
6. Name of Principal or Supervisor \_\_\_\_\_ Phone \_\_\_\_\_
7. College or University attended for undergraduate training \_\_\_\_\_
8. College or University attended for graduate training \_\_\_\_\_
9. Degrees earned \_\_\_\_\_
10. Identify the training you are seeking \_\_\_\_\_
11. When do you plan to take the training provided by the scholarship? \_\_\_\_\_  
*(The scholarship must be used beginning the summer of 2021 through August 31, 2023.)*
12. Will you complete the training with this scholarship? Yes \_\_\_\_\_ No \_\_\_\_\_
13. If yes, when will you complete the training? (month/date) \_\_\_\_\_
14. If no, when do you expect to complete the training? (month/date) \_\_\_\_\_
15. Explain why this training is needed and how it will directly benefit the students, fellow educators, and the instructional program at your school or institution. *(Provide your response on a separate sheet.)*

16. Provide the name and address of the eligible institution where you plan to use this scholarship. *(For the definition of an eligible institution, please refer to the scholarship information material.) Note: Must be an Alabama public institution only.*
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17. List any awards or honors you have received in your educational training and employment. *(Provide your response on a separate sheet.)*
18. List any community activities in which you are involved. *(Provide your response on a separate sheet.)*
19. Are you a member of the Alabama Education Association?\* Yes \_\_\_\_\_ No \_\_\_\_\_  
*(\*As the retired division of AEA, our scholarships are awarded to AEA members only.)*
20. Are you an Alabama resident who has been living in Alabama for at least 12 consecutive months?  
Yes \_\_\_\_\_ No \_\_\_\_\_
21. Have you been employed in an Alabama public school system for at least one full school year?  
Yes \_\_\_\_\_ No \_\_\_\_\_

I CERTIFY that the information contained in this application is accurate and complete. I agree that the Alabama Education Retirees Foundation has my permission to verify this information.

Signature of Applicant

Date

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**TO BE COMPLETED BY PRINCIPAL OR SUPERVISOR**

1. Describe in detail how the scholarship applicant has demonstrated excellence in his/her area of instruction, and how he/she will utilize the specified training at your school or institution.
2. Explain in detail why the field of study is a documented need in your school, school system, or institution.
3. Tell how the scholarship recipient will be able to share the benefits of this training with students and fellow educators at your school or institution.

***NOTE: Please provide all of your responses on a separate sheet.  
SIGNATURE IS REQUIRED.***

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**Completed application must be postmarked, faxed, or hand delivered by  
4 p.m. March 5, 2021 to:**

**Alabama Education Retirees Association, Inc.  
828 Washington Avenue, Montgomery, Alabama 36104 • 1-800-537-6867 • Fax 334-262-6002**

Scholarship information and additional applications may be photocopied as needed, downloaded from our web site at: [www.aerainc.org](http://www.aerainc.org), or obtained from the address listed above.