CHOOSE OHIO FIRST SCHOLARSHIP PROGRAM APPLICATION (COFSP)

General Eligibility Requirements:

- Be a Cleveland State University (CSU) student, enrolled Fall 2015 (anticipated) •
- Be admitted into a STEMM (Science, Technology, Engineering, Math, or Medicine) program at CSU • Be an Ohio resident •
- Have a current FAFSA on file with Financial Aid (www.fafsa.ed.gov) •
- Not already be receiving a full scholarship •

Please complete Sections 1 and 2

| Section 1 | | General Inf | ormat | ion | | | |
|------------------------|-------------------|-----------------|---------|----------|-------------|--------|--|
| New Application | n | | | | | | |
| Name (Last, First, Mic | ddle) | | | | | | |
| Address (Street) | | | | | | | |
| Address 2 (City, State | e, Zip) | | | | | | |
| Telephone () | | (home) | (|) | | (cell) | |
| Email Address | | | | | | | |
| CSU I.D. Number | | | _ | | | | |
| Major/Intended Minor | | | | | | | |
| Indicate the program | n that you are ap | plying for (cho | oose o | one only | '): | | |
| □ STEM Teacher E | ducation | | | | | | |
| Current Student Stat | | | ester/y | ear): | | | |
| | - | | | | | | |
| □undergraduate | □post bacc | ⊔graduate | | | | | |
| Signature: | | | | _ | | | |
| Date: | | | | | | | |

Section 2

Individual Program Requirements

Choose Ohio First: STEM TEACHER EDUCATION Requirements

Program Specific Eligibility Requirements: (in addition to the general requirement in Section1)

- Who Can Apply:
 - Current Science and Teachers
 - Current CSU Math and Science Majors
 - Pre-Service Teachers: Middle School (4th-9th grade) or Adolescent/Young Adult (Secondary)
 - Science and Math licensure students enrolled in the MUST Program
- Enroll in a degree program as a part-time or full-time student in the College of Education and Human Services leading to licensure in either Middle School or Adolescent/Young Adult mathematics and/or science education
- Remain in good academic standing with GPA of at least 2.5
- Participate in any required social and mentoring activities, including a required 10-Hour per semester tutoring commitment.

I am currently enrolled in the CSUteach program: \Box Yes \Box No

Transcripts

Attach a copy of all undergraduate and graduate transcript(s) (unofficial copy is acceptable)

Letter of Recommendation

One letter of recommendation form must be provided. This form should come from a teacher who is familiar with your ability in mathematics and/or science. The form is attached. The form must be submitted directly by the evaluator-by email to <u>csuteachscholarships@csuohio.edu</u> or mail to the address below.

Statement of Goals

Attach a separate typed sheet to your application. Please describe why you are interested in this Choose Ohio First scholarship. Your essay should discuss your educational experiences; interest in science or mathematics and what aspects of teaching you are most interested in or would like to learn more about. Describe how participating in this program will help you reach your long-term career goals. (Maximum of 400 words)

Application Deadline: August 1

Submit application by mail or email to:

Dr. Joanne Goodell or Renee Overton Cleveland State University 2121 Euclid Avenue, JF 345 Cleveland, OH 44115-2214

Campus Location: Julka Hall, Room 345 Email: csuteachscholarships@csuohio.edu

Declaration

I declare that all the information contained herein and provided is true, correct and complete and that if selected, I will use the D-STEM Choose Ohio First Scholarship Investment award to help meet my educational expenses during the period of the award. I am aware that my CSU email address will be the primary mode of communication regarding the scholarship. I also declare that I will participate fully in all requirements of the scholarship, as listed on the first page, including, but not limited to, the tutoring sessions at a local middle or high school.

Applicant Signature:



Cleveland State University

Robert J. Noyce and D-STEM Choose Ohio First Scholarship Programs Undergraduate and Post Baccalaureate Teaching Scholarship Recommendation Packet

Dear Evaluator,

The Robert Noyce and Choose Ohio First Scholarship Selection Committees depends upon and appreciates your careful appraisal of the above named applicant's potential as a math or science teacher. Please indicate your assessment of the applicant by placing a check mark in the appropriate boxes below AND the letter on the following page. If you have not observed one of the evaluation criteria, do not check a box for that category.

| | Outstanding | Very Good | Good | Fair | Poor |
|-------------------|-------------|-----------|------|------|------|
| Educational | | | | | |
| Persistence | | | | | |
| Curiosity | | | | | |
| Ability to Work | | | | | |
| with Children | | | | | |
| Leadership Skills | | | | | |
| Attitude | | | | | |
| Creativity | | | | | |

Signature of Evaluator_____

Date

Checking this box allows your typed name to be considered a valid signature.

Send this completed form and letter of recommendation to:

csuteachscholarships@csuohio.edu or via snail-mail to: Dr. Joanne Goodell

Julka Hall 210 2485 Euclid Avenue Cleveland, OH 44115



Cleveland State University Robert J. Noyce Scholarship Program Undergraduate & Post Baccalaureate Teaching Scholarship Application



Evaluator Assessment

Write a short (250–500 word) elaboration of your assessment, including rationale for your choices on the previous page. Include any other pertinent information you feel that would help us reach a decision on this applicant.