

**TENNESSEE EDUCATION ASSOCIATION
DON SAHLI-KATHY WOODALL
GRADUATE SCHOLARSHIP
Application Form**

NAME _____

ADDRESS _____

SCHOOL _____

ASSOCIATION _____

YEARS AS A UEP MEMBER _____

HOME PHONE NUMBER _____

SCHOOL PHONE NUMBER _____

Primary consideration for recipient shall be based fifty percent (50%) on past activities in the United Education Profession and fifty percent (50%) on academic ability, need, leadership, and potential as a leader and association leader within the teaching profession. Please provide as much information as possible in these areas:

I. Past Activities in the United Education Profession:

II. Academic Achievements:

III. Economic Need:

IV. Leadership Activities:

V. Association Leader with the United Education Profession:

(Attach extra sheets if additional space is needed.)

NOTE: All applications must be received at the **TEA Headquarters, Attn: Wanda Dickens, 801 Second Avenue North, Nashville, Tennessee 37201-1099, by June 1.** Application must be accompanied by a **nominating form** from the applicant's local association president.

