

SDACTE PROFESSIONAL DEVELOPMENT STIPEND

Applications should be e-mailed to Coleen C. Keffeler, coleen.keffeler@k12.sd.us.

Due on the first day of the summer conference.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Association for Career and Technical Education Membership: for _____ years starting in _____.

PURPOSE: To recognize SDACTE members committed to professional growth and development.

AVAILABILITY: One scholarship will be awarded annually as funds are available.
This year two (2) stipends of \$500.00 each will be awarded this year.

CRITERIA:

- ✓ The recipient will be awarded the scholarship upon proof of enrollment in a continuing education course as identified in the application form.
- ✓ The scholarship money must be distributed in the fiscal year it was awarded.
- ✓ Preference will be given to those who have not received the stipend the preceding year

Criteria	Possible Points	Maximum	Evaluator's Score
Section A – Professional Contributions			
1. Membership in SDACTE (1pt. for each year)		05	_____
2. Officer of an SDACTE division past/present		05	_____
3. SDACTE or Division Committee Involvement (5 pts. each)		20	_____
4. Volunteer Service (Professional & Civic) (5 pts. each)		10	_____
Section B – Professional Development			
1. Applicant must submit in typed, 200 words or less, statement of professional and personal benefits to be gained and need or special circumstances. Include the type of degree you are pursuing and the course(s) you will be enrolling in.		50	_____
2. Application is free of spelling/typing, grammatical errors.		10	_____