

Turner PTA/PTSA Scholarship Application

PTA/PTSA is a serviced-based association that thrives only through the strength & commitment of its volunteers. We seek to reward volunteerism and community involvement in order to insure a stronger future for Turner families.

Please return your completed application and bio to Turner Council PTA by April 1st. You may submit your

application: By email to tdcpta@gmail.com,

By interdistrict mail, Attn: Turner Council PTA, c/o Turner ASC

By mail, Turner Council PTA, 800 S 55th St, KCKS 66106

ELIGIBILITY REQUIRMENTS:

1. Student must be a current PTA or PTSA member within the Turner School District (any school).
2. Student must have completed a minimum of 8 hours of community service between their 9th and 12th grades of high school for Turner PTA (any unit). These hours can be completed simultaneously with the post-secondary assets graduation requirement.
3. All applications must be accompanied by a self written bio.

Name: _____ Phone: _____

Address: _____

Parent/Guardian(s): _____

How many years have you been a student in Turner? _____

School(s) attended in Turner	Current PTA Member?	Former PTA Member?	Eligible Service Hours
☐ Turner High School	☐ Yes ☐ No	☐ Yes ☐ No	_____
☐ Journey School of Choice	☐ Yes ☐ No	☐ Yes ☐ No	_____
☐ Turner Middle School	☐ Yes ☐ No	☐ Yes ☐ No	_____
☐ Turner Sixth Grade Academy	☐ Yes ☐ No	☐ Yes ☐ No	_____
☐ Junction Elementary	☐ Yes ☐ No	☐ Yes ☐ No	_____
☐ Midland Trail Elementary	☐ Yes ☐ No	☐ Yes ☐ No	_____
☐ Oak Grove Elementary	☐ Yes ☐ No	☐ Yes ☐ No	_____
☐ Turner Elementary	☐ Yes ☐ No	☐ Yes ☐ No	_____
☐		☐ Yes ☐ No	

How were you and your family involved in the PTA/PTSA through your academic career?

Please be specific and detailed regarding activities your family participated in (use back if needed):

Extra Curricular Activities – Sports/Clubs/Student or Community Organizations (use back if needed):

Name	Year(s)	Position/Office Held	Awards/Achievements
------	---------	----------------------	---------------------

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

School you plan to attend: _____

Area of interest: _____

Occupational Goal: _____

In 10 years, I hope to be: _____

What do you consider to be the most important thing you have learned throughout your academic career?

Why do you feel community service is important?

Bio attached: ☐ Yes

Proof of community service attached: ☐ Yes

Student Signature

Date

Record of Community Service

This letter confirms that _____ volunteered time at
_____ for _____
PTA/PTSA Unit.

Date(s) of Service: _____ Total Hours: _____

Additional Comments: _____

Verified By: _____

PTA/PTSA Position: _____

Phone Number: _____

Certification:

I certify that all statements made on this form are complete and accurate to the best of my knowledge and I understand and agree that misstatement or omission of any relevant information may subject the applicant to disqualification during the scholarship application review process.

PTA Signature: _____ Date: _____

Student:

It is your responsibility to keep this form so that it can be
turned in along with your scholarship application.