ILLINOIS RETIRED TEACHERS FOUNDATION
SCHOLARSHIP

1. GENERAL INFORMATION
A. The scholarship will be awarded to one full-time student each academic year for each IRT Foundation area.
B. The scholarship recipient shall receive a grant of $750 each for fall and spring semesters, totaling $1,500 for the year, to be used for educational expense.
C. If for any reason the recipient does not conform to any or all policies, the IRT Foundation Board has the right to revoke the scholarship.
D. All applications must be postmarked on or before March 7, prior to the applicant's junior or senior year in college, and mailed to the office of the IRT Foundation. Recipients will be notified by April 21 of that same year.

2. ELIGIBILITY
A. An application must be postmarked no later than March 7 and mailed to the IRTA office prior to a student's junior or senior year in college. The student must be accepted into a Teacher Certification Program in order to receive IRT Foundation Scholarship funding.
B. Applicants must be a resident of Illinois or have graduated from an Illinois high school.
C. Applicants may attend school in any state as long as the school attended maintains an accredited Teacher Training program.
D. Applicants must have and maintain at least a 3.0 GPA on a 4.0 scale.
E. The recipient must furnish a copy of the university or college official transcript prior to receiving funds.

3. APPLICATION PROCEDURE
A. Each applicant must complete an application provided by the IRT Foundation.
B. The applicant must submit a One page (double spaced) personal statement of need and reasons for applying for the scholarship.
C. Three letters of recommendation, from other than family members, must accompany the application. Please include name of reference, applicant's relationship to the reference, and a means of contacting the reference.
D. An official transcript from all colleges attended by the student must accompany the application.
E. Each applicant must sign a Consent to Release Information form authorizing the IRT Foundation to verify the accuracy of all information and documentation submitted with the scholarship application.
F. Verification of acceptance in a Teacher Education Program. (If a Community College student, a letter of acceptance from the University or University class schedule with course of study indicated.) (If a University student, school of study must be on the official transcript.)

Inquiries or questions, please contact Susan Goetz at the Illinois Retired Teachers Foundation, 828 S Second St, Springfield, IL 62704, 1-800-728-4782 or email susan@irtaonline.org.
PERSONAL DATA
Applicant’s name: (Last)________________________(First)________________________(Middle)____
Address:________________________________________________________________________
(City)________________________(State)________________________(Zip)________________________
Home Phone: ( )________________________ Cell Phone:( )________________________
Email:________________________________________________________________________

If not an Illinois resident, high school graduated from:_________________________________________

Marital Status of applicant:

____ Single   _____ Married   _____ Separated   _____ Widowed   _____ Divorced

Information requested below is for applicant’s parents or spouse if applicant lives with or is financially
dependent on parents or spouse for support. Independent applicants should list personal information. The
Foundation reserves the right to request copies of income tax returns.

Number in Household: _________ Number of Dependent Children: ________ Number in college_______

Total taxable household income from previous tax year (check one):

___$0 - $20,000   ___$20,001 - $30,000   ___$30,000 - $40,000   ___$40,001 - $50,000   ___Over $50,000

Please specify each source of this income. (If needed, please use a separate sheet of paper.)
Please indicate all non-taxable income received or expected to receive (source and amount). Examples
include JPTA assistance, welfare assistance, educational social security or veteran’s educational benefits.

________________________________________________________________________________________

I certify that the above information is true and correct to the best of my knowledge.

________________________________________________________________________________________

STUDENT’S SIGNATURE __________________________ DATE: ______

________________________________________________________________________________________

SIGNATURE OF PARENT OR SPOUSE (PLEASE CIRCLE ONE) __________________________ DATE: ______

ACADEMIC INFORMATION
Previous college attendance
Name of Institution and Dates attended:_____________________________________________________

Institution attending in 2021-2022:
Year of Graduation(ex. Spring 2024):_____________________________________________________

________________________________________________________________________________________

Note: Be sure to include the following: (1) Three letters of recommendation (not from family members), (2)
One page (double spaced) personal statement of need and reasons for applying for scholarship, (3) All
official college transcripts, (4) Form giving Consent to Release Information, (5) Verification of acceptance in
a Teacher Education Program (if transferring from a Community College).

Postmarked on/before March 7, 2021 to: IRTA Foundation, 828 S Second St, Springfield, IL 62704
Attention: Susan Goetz
(217) 523-8488       (800) 728-4782
CONSENT TO RELEASE INFORMATION

I, __________________________________________, give Consent for the Illinois Retired Teachers Foundation to verify my application information if necessary. I also consent that the IRT Foundation use my photograph and announce my award-winning in the media if I am a recipient of an IRT Foundation Scholarship

______________________________________________
APPLICANT SIGNATURE

______________________________________________
DATE