



Oxnard Educators Association
2024 Dependent Child Scholarship
Application

DEADLINE: May 17, 2024

Please attach your essay, a copy of your official transcript and one letter of recommendation with this application.

Student Information

Name: Phone:
Address: City: Zip Code:
School: Expected Graduation Date:
Teaching credential program accepted to:

Parent Information

Parent or Guardian Name: Phone:
Address: City: Zip Code:
Current OSD School Site:

1. List any extracurricular activities and the year in which you participated:

Table with 2 columns: Activity, Year/s. Includes 3 rows of blank lines for data entry.

2. List all community activities/volunteer work for the past four (4) years:

Table with 2 columns: Activity, Year/s. Includes 3 rows of blank lines for data entry.

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Name: \_\_\_\_\_

3. List all *paid work experience* for the past four (4) years:

<u>Paid Work Experience</u>	<u>Time Employed</u>
_____	_____
_____	_____
_____	_____
_____	_____

4. List any *awards* and/or *honors* you received during high school:

<u>Award</u>	<u>Organization</u>	<u>Year</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

5. Write a one-page typewritten essay of 300 words or less about your future goals and how you plan to achieve them. Include significant people and/or events that have influenced you. Explain your unique situation and/or any special hardship circumstances.

Attach essay to this application along with an official high school transcript and a letter of recommendation.

Signature \_\_\_\_\_ Date \_\_\_\_\_

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For OEA use only:

Date received: \_\_\_\_\_ Time: \_\_\_\_\_

Received by: \_\_\_\_\_

OEA Membership confirmed: Yes  / No

- Check off list:  Application  
 Essay  
 Transcript  
 Letter of recommendation

Total Score:

Weighted/Cumulative G.P.A. = \_\_\_\_\_ / Class Ranking = \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_