

MIAMISBURG CITY SCHOOLS MIAMISBURG CLASSROOM TEACHER ASSOCIATION

Please print legibly and fill out the following form completely. If additional space is needed, use extra 8.5" by 11" sheet of paper with your name and address on the top.

STUDENT INFORMATION

Name (First, MI, Last):				<input type="checkbox"/> Male <input type="checkbox"/> Female	
Address:			Home Phone:		
City:		State:	Zip:	Cell Phone:	
Email Address:			Class Rank:		
GPA:	ACT Composite:	SAT Math:	SAT CR:	SAT Writing:	

COLLEGE/UNIVERSITY INFORMATION

1.	Student/University ID # (if known):	
2.	Student/University ID # (if known):	
Intended College Major:		

ESSAY INFORMATION

Responses should be no more than 300 words typed, double spaced with student's name at the top of each page.

WHY DO YOU WANT TO BECOME A TEACHER AND WHO HAS INFLUENCED YOU TO BECOME A TEACHER.

REQUIRED ATTACHMENTS

1. Most recent transcripts with GPA and ACT/SAT scores
2. Acceptance letter(s) from college/university listed above
3. Essay response
4. Copy of Student Aid Report (SAR) from FAFSA

We hereby certify that the information set forth in this application is true to the best of our knowledge.

Applicant's Signature

Parent/Guardian Signature
(if applicant is under age 18)

Date