



## The Ohio Council of Teachers of Mathematics Memorial Scholarships

In 2013 the Ohio Council of Teachers of Mathematics (OCTM) will award six \$750 scholarships. An applicant must

- be a junior, senior or graduate student in the fall of 2013 at a college or university in Ohio;
- be enrolled in a program that leads to an Ohio Resident Educator license in a field which includes the teaching of mathematics at some level, K-12; and
- be a prospective first-time teacher (i.e. must not have taught professionally).

Additionally, the Sarah Greenholz\* Memorial Scholarship of \$1500 will be given to the top applicant who meets the following criteria.

- The awardee of the Greenholtz Scholarship must be working toward a teaching license in a field that includes the teaching of mathematics at some level, K-12.
- A candidate must present strong evidence of the likelihood of future success as a teacher of mathematics.
- Individuals who have taught professionally or who have already earned a bachelor's degree and are changing careers are not eligible for this scholarship.

Persons interested in applying for OCTM Memorial Scholarships must download the application form from our website (<http://www.ohioctm.org>) and submit the completed application, official college transcript(s), institution verification form, and one letter of support from a college/university faculty member or cooperating teacher.

Please mail these items to:

OCTM Scholarships  
c/o Rebecca E. Maggard  
P.O. Box 448  
Eaton, OH 45320

Applications must be postmarked on or before May 24, 2013.

Questions may be addressed to Memorial Scholarship Co-Chairs Peggy Kasten ([mkasten@columbus.rr.com](mailto:mkasten@columbus.rr.com)) or Rebecca Maggard ([rmaggard@woh.rr.com](mailto:rmaggard@woh.rr.com))

***\*Note: Sarah (Sally) Greenholz was a mathematics teacher and supervisor in Cincinnati. She was a charter member of OCTM and served as vice president of NCTM from 1967 to 1969. In 1986 Sarah received the Christofferson-Fawcett Award for Lifetime Contributions to Mathematics Education.***



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Institution Verification of Enrollment for  
the 2013-2014 Academic Year

This is to verify that \_\_\_\_\_  
*(Name of scholarship applicant)*

is enrolled in a program at \_\_\_\_\_  
*(Name of institution)*

leading to an Ohio Resident Educator License in \_\_\_\_\_  
*(Teaching area)*

\_\_\_\_\_  
*(Registrar's Signature)*

\_\_\_\_\_  
*(Date)*





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Memorial Scholarships

Application Form

Applicants for the OCTM Memorial Scholarships must submit a completed application, official transcript(s) and one letter of support to: ***OCTM Scholarships, c/o Rebecca Maggard, P.O. Box 448, Eaton, OH 45320.*** All materials must be postmarked on or before ***May 24, 2013.***

Official transcripts from all post-secondary institutions attended must be submitted.

The attached form verifying your enrollment in a licensure program during 2013-2014 must be signed by your institution's registrar. The institution seal is required on this verification.

One letter of support from a college/university faculty member or cooperating teacher must be submitted. The letter should describe the applicant's promise as a teacher of mathematics and leader in the mathematics education community. Only one letter will be used. If multiple letters are submitted only the first letter will be considered; other letters will be disregarded.

The application form has been created using the table feature in Microsoft Word. Please download the file to your computer and type in the appropriate spaces. The space will automatically expand as you type. Sometimes specific instructions are given in an italic font enclosed in parentheses. To enter information in spaces so designated, click in the space, delete the italicized print and type in your response. After completing the form please print and sign the application form. Mail the form and all requested materials to the address designated above.

Name	
Email Address	
<b>Permanent Address</b>	
Street Address	
City, State Zip	
Phone	
<b>Temporary School Address</b>	
Street Address	
City, State Zip	



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Application Form

Phone			
School address is valid until			
<b>Eligibility Information</b>			
During the 2013-2014 school year I will be enrolled at	<i>(type the institution name here)</i>		
Degree Program for 2013-2014	<i>(e.g. BS, BA, BSE, MED, MAT)</i>		
My 2013-2014 program leads to an Ohio teaching license in	<i>(specify the license sought here)</i>		
This license enables me to teach mathematics in grades	<i>(specify the grade levels here)</i>		
Do you currently hold a bachelor's degree?	<i>(specify yes or no)</i>		
Have you ever taught professionally?	<i>(specify yes or no)</i>		
<i>(if yes, please explain)</i>			
Class Standing as of Fall 2013 (Junior, Senior, Graduate)			
Anticipated Date for completion of licensure program			
<b>Academic Performance Information</b> (Information entered in this area must be substantiated by official transcripts)			
Overall Grade Point Average (GPA) at your current institution			
If you are in a graduate licensure program, list your overall undergraduate GPA			
List the mathematics or mathematics methods courses which you have taken.			
Course Number and Name	Institution	Credits Earned (Indicate Semester or Quarter)	Grade Earned



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If more space is needed, with the cursor in last space above, click on the **Layout** tab. Then click **insert row below**. Add as many rows as you need.

**Professional Activities**

List activities related to mathematics or education in which you have been engaged during the past 3 years. Include the dates during which you engaged in the activity.

Activity	Dates

If more space is needed, with the cursor in last space above, click on the **Layout** tab. Then click **insert row below**. Add as many rows as you need.

Are you a member of OCTM or an OCTM Affiliate?	<i>(specify yes or no)</i>
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Have you ever attended an OCTM conference	<i>(specify yes or no)</i>
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**Essay Question**

In the space below, describe the "ideal" teacher of mathematics – i.e. the teacher you would like to become. You may base your description on a person, but please do not mention names. Note that this essay will be scored on both mechanics (how well did you write) and content (what did you say). Please limit your response to approximately 300 words. The space will expand to accommodate your writing.

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By signing below, I attest that the information contained on this application is true to the best of my knowledge.			
Signature		Date	

All materials (completed application, transcripts, and letter of support) must be postmarked by May 24, 2013. Mail materials to  
OCTM Scholarships  
c/o Rebecca Maggard  
P.O. Box 448  
Easton, OH 45320

Questions may be directed to the OCTM Memorial Scholarship Committee Co-Chairs

Peggy Kasten - [mkasten@columbus.rr.com](mailto:mkasten@columbus.rr.com)

and/or

Rebecca Maggard - [rmaggard@woh.rr.com](mailto:rmaggard@woh.rr.com)