



The Glenn Fox VMATYC Mathematics and Computer Science Scholarship Application Form for 2009-2010

Please type or print.

I. Personal Information

Name \_\_\_\_\_

Address \_\_\_\_\_

Community College \_\_\_\_\_

Curriculum (Program) \_\_\_\_\_

I am, or will be upon transfer, a mathematics, mathematics education, or computer science major. \_\_\_\_\_ Yes \_\_\_\_\_ No

I intend to pursue a career involving the teaching of mathematics or computer science. \_\_\_\_\_ Yes \_\_\_\_\_ No

Anticipated date of graduation/transfer \_\_\_\_\_ (month/year)

List college activities in which you have participated: (be sure to include any relevant teaching experience)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List community activities in which you have participated: (be sure to include any relevant teaching experience)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List awards and scholarships received:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**II. Application Letter**

Attach a brief, typed biography (not to exceed one page) including:

- Your future plans in mathematics or computer science (career, interest, etc.)
- How you would benefit from the scholarship
- Any other information that will help the Selection Committee, including your intention to teach, if applicable, or any experiences you have already had with teaching

**III. Letters of Reference, one each from:**

- Your Sponsoring Faculty Member (must be a current VMATYC member)
- Another member of your community college faculty, staff, or administration
- An individual not connected with the community college (not a family member).

**IV. Include official transcripts of all college courses through Spring Semester, 2009.****V. To be completed by Sponsoring Faculty member (must be a current VMATYC member)**

I have reviewed all materials included in this application and to the best of my knowledge they are correct and accurate. I agree to act as mentor for this student, to monitor this student's status, and to report that status to the President of VMATYC or a designated officer.

\_\_\_\_\_  
Faculty Sponsor's Name (Print)

\_\_\_\_\_  
Official Title

\_\_\_\_\_  
Faculty Sponsor's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
College Address

(\_\_\_\_\_)\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
E-mail

**VI. To be completed by Student**

To the best of my knowledge, the information I have provided in this application is accurate.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

**VII. Mail to: Sarah Martin  
Scholarship Chair  
Virginia Western CC  
P. O. Box 14007  
Roanoke, VA 24038**

**Deadline for postmark on all materials: June 5, 2009**

Selection will be made by July 24, 2009