Florida’s Best and Brightest Teacher Scholarship

2017/2018 Application Form

**Do not fax or email application.** Please bring to Human Resources or send by school courier with

all documents. Must be received by November 1st, 2017 with all documents needed.

***Please Print and fill out legible***

Name of Teacher \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First Middle Last

Name on College Board (SAT) or (ACT) Documentation if different from above\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee ID number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth \_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_

Official Certification Number (number on teacher’s state issued certificate \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you received the scholarship before? \_\_\_\_\_ Yes 2014/15 \_\_\_\_\_\_\_\_ Yes 2015/16 \_\_\_\_\_\_\_\_\_ No Never

Current School Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School 4 digit Center number \_\_\_\_\_\_\_\_\_\_\_\_

***Please attach College Board (SAT) or (ACT) that shows you scored in the (National) 80th percentile of test‐takers when you took the examination. These are the only tests acceptable this year. Make sure you also had a Highly Effective evaluation for 2016/17 school year.***

*If the name on documentation is different from the name on your teaching certificate, please also submit official documentation of your name change. (Example: marriage license) It shows both names.*

*If you taught in another Florida District last year please obtain your evaluation from that district and attach with your application. (This is your responsibility to make sure we receive this from them.)*

Documents sent by email or fax **are not** an acceptable method of delivery, state auditors want clear documents. The School District of Santa Rosa County will not be responsible for missing documentation or late submission regardless of delivery method. *Again please DO NOT scan to email or fax. Bring in person, mail or use school courier.*

***By signing below, the educator named above attests that all information provided is accurate.***

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

***All documentation is to be received in Human Resources by 4 PM on November 1st, 2017.***

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**For Santa Rosa County School District Use Only** *(Please do not fill out information below)*

Does the college entrance examination documentation indicate the teacher is eligible for the scholarship?

Yes \_\_\_\_\_ No\_\_\_\_\_\_

Did this teacher receive a **highly effective** evaluation for the 2016 - 17 school year as a Classroom Teacher?

Yes \_\_\_\_\_ No\_\_\_\_\_\_

Was this a first year teacher to the State of Florida? Yes \_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_

Did teacher work for a different FL school district last year? Yes \_\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_