



2022-2023 K-12 Teacher Grants

Eligibility *

I confirm that I am eligible for this scholarship

Qualifications *

I confirm that I am qualified to apply for this scholarship

Use of Funds *

If awarded, I agree to use funds as outlined

Notification *

I understand the notification and acceptance process

Application Judging *

I understand the judging process

Personal Data Disclosure *

I Agree to the above data disclosures

Applicant's Information

Name *

First Name

Middle Name

Last Name

Suffix

Address *

Street Address

Street Address Line 2

City State

Zip Code

Best Contact Number *

Area Code Phone Number

Secondary Contact Number *

Area Code Phone Number

Email *

example@example.com

Applicant's Military ID Card Expiration Date *

Month Day Year

Name and Address of K-12 School *

Street Address

Street Address Line 2

City State

Zip Code

Military Sponsor's Information

If Applicant is the Military Sponsor, please provide your military information.

Sponsor's Eligibility Category: (Check One) *

Sponsor Name *

First Name Middle Name Last Name Suffix

Rank/Grade *

Sponsor's Organization *

Organization Address *

Street Address

Street Address Line 2

City

State / Province

Postal / Zip Code

Duty Phone Number *

Area Code

Phone Number

Home Address (If different than the applicant's)

Street Address

Street Address Line 2

City

State / Province

Postal / Zip Code

Sponsor's Best Contact Phone Number *

Area Code

Phone Number

Sponsor Email Address *

Sponsor's ID Card Expiration Date *

Month

Day

Year

Intended Grant Request

Community/Club/Volunteer/Work/Extracurricular Activities

List up to 5 extracurricular activities including clubs, volunteer, internships and other organizations or clubs related to your school or community. Verification of participation may be required. List most recent service first.

Honor and Awards

Questions

Please answer all questions. 500 words max.

How has being military affiliated teacher had an impact on your classroom? *

Tell the Barksdale Spouses Club Scholarship Committee a little about yourself & why you are passionate about teaching. *

ACKNOWLEDGMENTS

Are you currently employed at the school? *

YES

NO

How long have you been employed at the school? *

Name of K-12 Principal *

First Name Last Name

Email of K-12 Principal *

example@example.com

Phone Number of K-12 Principal *

Area Code Phone Number

Is the Sponsor expected to PCS within the next 24 months? *

YES
NO

Intended Grant Request - click all that apply *

Classroom Supplies Field Trips
STEAM Grants

Please describe what specifically the grant will be used for & how it will benefit either your classroom or school. How will this grant enrich the experiences and/or well-being of students? *

Do you have any children affiliated with the military in your classroom? *

YES
NO

Do you have any intention of leaving the school and/or transferring to a K-12 school beyond the 60 miles radius of Barksdale AFB within one calendar year from April 1, 2023? *

YES
NO

Branch of Service *

Will you & a guest be able to attend the BSC Scholarship Banquet & End of Year Social tentatively scheduled for Friday, April 14, 2023 in the evening? Why or Why Not? *

Are you or a member of your household a member of the Barksdale Spouses Club? Why or Why not? *

How did you hear about the BSC Teacher Grant Program? *

Do you plan on participating in the BSC Shamrock Shuffle 5K/10K on March 18th, 2023 or did you participate/volunteer in the event? Shamrock Shuffle proceeds go toward the BSC Scholarship Fund/Teacher Grant Program & other charitable activities by the BSC. Why or why not? *