Michigan PTA
Fran Anderson Scholarship Application

Deadline: April 15, 2021

Name: ____________________________________________________________________________________

Address:  ____________________________________________ ______________________________________

Phone: _________________   E-Mail:   ___________________________________________________________

Name of High School: ________________________________________________________________________

To which PTA/PTSA do you belong?  __________________________________________________________

Overall high school grade point average by the first semester of senior year:  _______________________

Please list the activities in which you have been involved from each area listed below.

PTA/PTSA:   ________________________________________________________________________________

School:  ___ ________________________________________________________________________________

__________________________________________________________________________________________

Community:  ________________________________________________________________________________

__________________________________________________________________________________________

Michigan colleges/vocational institutions attending/applied to:  ___________________________________

_________________________________________________________________________________________ _

Probable Major(s): __________________________________________________________________________

Applicants must attach the following items to this application:

- High School transcript
- Two (2) letters of recommendation – (1) from teacher, counselor, coach, or community service advisor and (1) from PTA/PTSA Leader (Local Unit of Council Board Member)
- One page essay, themed upon how the skills gained from your PTA/PTSA involvement will affect your future

___________________________________________    __________________________
Student’s Signature                        Date

___________________________________________    __________________________
PTA/PTSA President’s Signature*            Date

*PTA/PTSA Presidents must confirm that their PTA/PTSA is in good standing BEFORE submitting.

Mail Completed Application to:
Michigan PTA – Scholarship Committee
P.O. Box 510535, Livonia, Michigan 48151