



# Shelby County Schools Education Foundation NBCT Component Grant Application



(please print)

Name \_\_\_\_\_

School \_\_\_\_\_

School Address/Phone \_\_\_\_\_

Home Address \_\_\_\_\_

Home Phone \_\_\_\_\_

\_\_\_\_\_

Cell Phone \_\_\_\_\_

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

How many years have you been teaching? \_\_\_\_\_ How many more years do you plan to teach? \_\_\_\_\_

Do you have tenure in the SCS system? **Y/N** Current Subject/ Grade Level \_\_\_\_\_

Level of teaching certificate \_\_\_ (B, A, AA) Highly qualified \_\_\_\_\_ (yes/no)

Intended NBPTS Certification Area \_\_\_\_\_

(visit website [www.nbpts.org](http://www.nbpts.org) for clarification)

### **Before signing, please check statements below.**

**ALL MUST BE CHECKED FOR THE APPLICATION TO BE ACCEPTED.**

**THESE ARE THE OBLIGATIONS UNDER THE AGREEMENT WITH SHELBY COUNTY SCHOOLS.**

- In signing an agreement with the Shelby County Schools Education Foundation (SCSEF) NBCT Component Grant program, if designated as a grant recipient, you commit to reimburse all fees paid by SCSEF if the component funded is not attempted.

\_\_\_\_\_ I understand and am willing to accept my obligations to Shelby County Schools (SCS).

\_\_\_\_\_ I commit to attend the University of Montevallo Candidate Support Program paid for by SCSEF.

\_\_\_\_\_ I acknowledge I am responsible for the \$75 application fee to be paid online.

\_\_\_\_\_ I have been to the NBPTS website ([www.nbpts.org](http://www.nbpts.org)) to examine the program.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Principal Signature \_\_\_\_\_ Date \_\_\_\_\_

(official use only)

Grant # \_\_\_\_\_ (official use only)

Grant #: \_\_\_\_\_

## GUIDELINES

- Grant applications must be received by **4:00pm on April 30, 2018**. Applications will be processed and judged, and grants will be awarded in May 2018.
- Grants will be awarded in the amount of \$475. This amount covers one component. Candidates are responsible for the \$75 application fee that is to be paid online for each assessment cycle.
- In addition, Shelby County Schools Professional Development Department will pay for 3 days of professional leave for the purpose of preparing and completing the certification process.
- Teachers at any point in the certification process may apply.
- This application requires the signature of your principal. This insures that the administration is aware of your participation in the grants program and should not be interpreted as “permission” to submit the application.
- All applications must be complete. Incomplete applications cannot be considered for funding.
- Mail or Pony **3 stapled** copies attached to **1** Cover Page (page 1), to:

Shelby County Schools Education Foundation  
c/o Kendall Williams  
SCISC  
601 First Street North  
Alabaster, AL 35007

**DO NOT use your NAME or your SCHOOL or DEPARTMENT’S NAME anywhere in this application except on page 1. Grant # will identify applications for committee.**

**\*Please attach your writing sample (both questions) on separate sheets of paper and submit both with your application.**

**1. What is your personal philosophy of education?** Analyze your own teaching practice and how it relates to the five core propositions of the NBPTS. Type and double space the entry. Length should not exceed one page.

**2. What is your most successful teaching unit?** How does it impact student learning? Describe this unit in detail. Type and double space the entry. Length should not exceed one pages.

**\*Questions?**

E-mail [k3williams@shelbyed.org](mailto:k3williams@shelbyed.org) or [a3walker@shelbyed.org](mailto:a3walker@shelbyed.org) for more information.

**All applications and writing samples must be delivered to SCISC by**

**4:00 PM on Monday, April 30, 2018.**