

Member School Districts: Airport, Flat Rock, Gibraltar, Grosse Ile, Huron, Riverview, Southgate, Trenton and Woodhaven-Brownstown

CTE Student – Scholarship Form

Name:	CTE P	CTE Program:				
Home School:	Program School:					
Grade:	Non-Tr	aditional:	Yes	No		
	CTE In	CTE Instructor:				
In order to be considered the scholarship and been accepted in a post-secondary cacceptance letter is required to be attack	career tech	nical-relate	Senior and d program.	must have A copy of	e applied to the	
Number of days absent for Year (Attach Attendance Profile)	0-2	3-4	5-6	7-8	9-10	
All of the following sections must be conexplanation. Include details if possible. The ratings are as follows: 5=Best 4=G					ing	
Work Ethic	5	4	3	2	1	
Self-Motivation	5	4	3	2	1	
Positive Attitude	5	4	3	2	1	
Student consistently goes beyond requirements	5	4	3	2	1	
Student gets along with teachers and other students	5	4	3	2	1	
Proficiency in program area	5	4	3	2	1	
Supporting Explanation						

Attached additional document if necessary

Provide a detailed description for the following three sections. Please rate the level of involvement for each section, 5 being the highest and 1 being the lowest.

	Describe involvement below	Score is as compared to peers
List any program-related work done outside of school (jobs or otherwise)		Circle One 5 4 3 2 1
List any club(s) student may be involved with related to the program and outside activities including CTSO's.		Circle One 5 4 3 2 1
List any volunteer/community service involvement		Circle One 5 4 3 2 1
List any NTHS involvement		Circle One 5 4 3 2 1

Nominee must provide a paragraph about him/herself (attach). This paragraph is mandatory for final consideration. Please include benefits received from CTE program, future educational and workforce plans, and how scholarship money will be used.

Student Name			
Parent (s)/Guardian(s) Nam	ie		
Address			,
		Phone	
Email			

Before submission, please e	ensure the following iter	ms are included:	
A copy of a college acc	eptance letter		
Student's high school tr	anscript		
Number of days absent	(Attach Attendance Pro	ofile)	