

PHI DELTA KAPPA SHOWCASE OF TEACHING
2020-2021 SCHOLARSHIP APPLICATION



(Student must be a high school senior and participate in the virtual SHOWCASE OF TEACHING to be eligible)

Name _____
Last, First, Middle Area code – Telephone Number

Address _____
Street City State ZIP Code

Name of High School _____

Name of High School Counselor or Showcase of Teaching Sponsor _____

Parent(s) Name(s): Father _____ Mother _____

Parent(s) Phone No. Father _____ Mother _____

Size of your Graduating Class _____ Your Class Rank _____ Your G.P.A. _____

Sponsor's Name _____ Email/Phone No. _____

Principal's Name _____ Email/Phone No. _____

List High School/Community Activities and Honors _____

Indicate why you are interested in a career in teaching: (Attach a page if necessary)
