

# Paid Internship Scholarship for Aspiring Virginia Educators Summer/Fall 2024

Deadline: April 19, 2024

#### **GRANT CONTACT INFORMATION:**

MS. SHAWNA LEBLOND, DIRECTOR OFFICE OF APPRENTICESHIPS DEPARTMENT OF TEACHER EDUCATION AND LICENSURE VIRGINIA DEPARTMENT OF EDUCATION

#### [PHYSICAL ADDRESS:]

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# VIRGINIA DEPARTMENT OF EDUCATION P. O. Box 2120 Richmond, Virginia 23218-2120

Funding: Virginia's American Rescue Plan Elementary and Secondary School Emergency Relief

**Issuing Agency:** Virginia Department of Education

**Application Due:** 4pm EST on Friday, April 19, 2024

**Application Format:** The institution of higher education will submit the completed application and ranking

sheet as one file for each candidate to the Department of Education via a secured SSWS

portal.

**Grant Period:** December 2021 – September 2024

**Agency Contact:** Ms. Shawna LeBlond, Director

Office of Apprenticeships

804-750-8594/ Shawna.LeBlond@doe.virginia.gov

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# PART I: SCHOLARSHIP INFORMATION, ELIGIBILITY CRITERIA, AND APPLICATION PROCEDURES

#### AMOUNT OF SCHOLARSHIP

As part of Virginia's American Rescue Plan Elementary and Secondary School Emergency Relief (ARP ESSER) funding, \$2,000,000 in grant funding has been made available to support qualified candidates approved for and enrolled in a final semester culminating clinical experience, such as an internship or student teaching experience. In order to be considered, candidates must be enrolled full or part time in an approved Educator Preparation Program (EPP) with a public or private institution of higher education (IHE) and seeking full licensure in Virginia. The supervised clinical experiences "shall be continuous and systematic and comprised of early field experiences with a minimum of 10 weeks of successful full-time student teaching in the endorsement area sought under the supervision of a cooperating teacher with demonstrated effectiveness in the classroom. The summative supervised student teaching experience shall include at least 150 clock hours spent in direct teaching at the level of endorsement in a public or accredited nonpublic school" as stated in Virginia Code 20-543-140.

Institutions may nominate up to **two** deserving students per semester (I.e. 2 for summer 2024 and 2 for fall 2024) and will be asked to give preference to students facing significant barriers including those who demonstrate financial need and/or first-generation college students and those seeking endorsement in top critical shortage areas in Virginia. Individual scholarship awards of up to \$15,000 may be awarded for the semester. Nominations for candidates expected to be enrolled for the Summer 2024 and Fall 2024 semester will be accepted through SSWS until **4pm on Friday, April 19, 2024.** 

Funds will be disbursed to the students (usually to the students' home institutions) from one of three institutions of higher education who have agreed to serve as fiscal agents for their neighboring colleges and universities. Funds will be disbursed in May and August 2024.

A Summary Report with updated information will be due **Friday**, **August 23**, **2024 for summer recipients and Friday**, **December 13**, **2024 for fall recipients**. The format for the report will be shared by the VDOE in advance of the due date.

# **ELIGIBILITY CRITERIA**

Subject to available funding, this internship scholarship is for teacher or school counselor candidates enrolled in an approved education program at an accredited Virginia public or private four-year institution of higher education in the Commonwealth. Candidates must (i) be enrolled full-time or part-time in an approved undergraduate or graduate education program or are participants in another approved education program such as school counseling and (ii) be nominated by the institution where they are enrolled (iii) be completing their final culminating clinical experience, such as internship or student teaching.

As institutions consider candidates for nomination, they are welcome to develop their own internal process for identifying deserving candidates. However, institutions are encouraged to give preference to students who demonstrate financial need, first-generation college students, students from underrepresented backgrounds, and/or students seeking endorsement in top critical shortage areas in Virginia.

#### APPLICATION PROCEDURES

Once an institution has identified up to 2 nominees, the nominees must complete and return the below application for the Paid Internship Scholarship for Aspiring Virginia Educators to the **designated dean/chair**, **director or other authorized designee of the teacher education program** in accordance with the procedures and deadlines established by the student's home institution.

The IHE will then submit the completed application *as one file* for each candidate to the Department of Education via a secured SSWS portal by **4pm on Friday, April 19, 2024.** Designated individuals at each institution have access to this portal and are advised to confirm access well before the due date, as restoring access may take several days.

Those students selected for the scholarship will be notified by the Virginia Department of Education.

If an institution's nominee is selected as an award recipient, the institution will be asked to submit a Summary Report with updated information will be due **Friday**, **August 23**, **2024 for summer recipients and Friday**, **December 13**, **2024 for fall recipients**. The format for the report will be shared by the VDOE in advance of the due date.

#### **DISBURSEMENT OF FUNDS**

Students selected to receive the Paid Scholarship for Aspiring Virginia Educators will be notified by email. **Students must reply via email within a specified time period** of receiving their email notification to indicate that they intend to accept the scholarship award. Once a student has indicated that they plan to accept the award, the Department of Education will instruct the three institutions of higher education acting as the fiscal agents to begin the process of disbursing funds.

#### REPAYMENT OF FUNDS

In the event that the student withdraws from or exits the program or does not successfully complete the clinical experience, the student and the college or university must immediately notify the Department of Teacher Education and Licensure, Virginia Department of Education in writing to begin the process of refunding the award amount.

By being awarded the Grant, and in order to remain eligible for application of the Grant award, the Student must successfully complete the Program's Clinical Experience. The Student must successfully complete the Program's Clinical Experience by the conclusion of the Clinical Experience, during the one academic semester in which the Clinical Experience is held. The Student agrees to repay the entire amount of the awarded Grant in the event that the Student does not successfully complete the Program's Clinical Experience by the conclusion of the Clinical Experience. In the event that the student does not successfully complete the Program's Clinical Experience, and is liable for repayment of the award, the Student agrees to repay the entire outstanding balance of the Grant and to pay all collection costs, and reasonable attorney fees incurred by the Department of Education.

Any claim, dispute, or default which may arise out of the obligations of the Student under this document shall be adjudicated in the General District Court of the City of Richmond, Virginia or Circuit Court of the City of Richmond, Virginia. The Student expressly consents to such jurisdiction and venue, and specifically waives any and all rights that the Student may have may have to contest the jurisdiction and/or venue of the above-mentioned forums and to demand any other forums.

This Scholarship Grant agreement is governed by and shall be construed in accordance with Virginia law. The Student acknowledges that all repayment obligations set forth in the preceding paragraphs are subject to collection pursuant to the set-off debt collection program (Virginia Code §§ 58.1-520 et seq.) and waives any right to contest that set-off under the provisions of the Setoff Debt Collection Act.

# PART II: <u>APPLICANT'S PERSONAL INFORMATION</u> (to be completed by the student)

<u>Last Name</u>	<u>First Name</u>	Middle Name		
Date of Birth (Month/Day/Year)	Gender (Select one)  Male Female	(meaning that no	-generation college student? one of your parents completed a niversity degree)	
Which of the following types of finance awarded for the Summer/Fall 2024 ser  GrantAmount for the ser  ScholarshipAmount for the ser  Loan (institutional, federal, and/or page 10.000)	mester? emester: emester:	emester:	On average, how many hours per week do you work in a paid position (excluding internships or work for academic credit) during a a typical semester?  Hours:  If you anticipate having to reduce weekly hours worked for the upcoming semester, how many hours do you expect to work each week (enter 0 if none):  Hours:	
If you are an undergraduate student and have completed the Free Application for Federal Student Aid (FAFSA®) form, please indic your Expected Family Contribution (EFC), as reported on your St Aid Report (SAR):		If you are not currently claimed as a dependent by any parents or guardians, please share your household income and the number of individuals in the household, including yourself:  Household income:		
		Number of individuals in household:		
Race (for statistical purposes only - ch	eck all that apply)	T (WITTE OF ST TITE		
1. Black (Not of Hispanic Origin) 2. Hispanic 3. Asian			6. White (Not of Hispanic Origin) 7. Other	
Permanent Address (Street Address, P. O. Box)  Must be a domiciliary Virginia resident. Address must be in Virginia.				
City	State	Zip Code		
Semester Address (Street Address, P. O. Box) if different from address listed above.				
City	<u>State</u>	Zip Code		
Telephone Numbers				

Work ( )	Home ( )	Mobile ( )			
School Email Address	School Email Address				
Name of College/University Currently	Enrolled				
Name of Approved Education Endorse	ement Program				
Are you enrolled in a five year program	n? Yes No				
College Level (Please check one of the	ne following :)				
First-Year Sophomore	☐ Junior ☐ Se	nior Graduate Student			
<b><u>Current Status</u></b> (Please check one of	the following)				
Full-Time Student	<del></del>	art-Time Student			
Diago abook the magazine and our		per of semester credit hours enrolled:			
Please check the program endors	ement area in which you	are enroned and plan to teach:			
Special Education (Specify area)    Early Childhood Special Education (Birth through Age :   General Curriculum K-12   Adapted Curriculum K-12   Visual Impairment PreK-12   Hearing Impairment PreK-12    Elementary Education (Specify area)   Early/Primary Education PreK-3   Elementary Education PreK-6    Middle Education 6-8 (Specify area)   English   History and Social Science   Mathematics   Science					
Mathematics (Grades 6-12) including Algebra I					
Career and Technical Education (Specify area)  Agricultural Education Business and Information Technology Marketing Education Technology Education Family and Consumer Science  Science (Secondary) (Specify area)					

☐ Biology ☐ Chemistry ☐ Earth Science ☐ Physics				
Foreign Language PreK-12(Specify area)  Arabic Chinese French German Italian	☐ Japanese ☐ Korean ☐ Spanish ☐ Russian ☐ Latin			
English (Secondary)				
Library Media PreK-12				
History and Social Science (Secondary)				
Other (Specify endorsement area)				
Please complete the following:				
If applicable, anticipated graduation date for undergraduate degree:  If applicable, anticipated graduation date for graduate degree:				
Current Cumulative Grade Point Average on a 4.0 scale or e				
What amount (up to \$15,000) are you seeking for the semester in which you will complete your internship? The amount requested cannot be greater than total expenses outlined in the budget below.				
Please complete the below semester budget (be sure to annual expenses):	only report expenses for the <i>semester</i> , rather than			
Type of Expense for the Semester	Amount for the Semester (in US Dollars)			
Tuition Class Materials (books, etc)				
Housing				
(room/board for on-campus students or rent/mortgage f	or off-campus)			
Utilities (electricity, water, gas, phone, internet, etc)				
Meal Plan (if on campus) or Grocery Expenses (if off c	ampus)			

Other (please specify)				
TOTAL				
Please complete the following short-answer (150-300words) either typed below or attached:				
Are there any factors that you feel the selection committee should consider in reviewing	ing your application?			
(In addition to information on your motivation to teach and your merit as an educator, the committee is especially interested in learning more about how this scholarship can assist you in completing your education. For example, you may wish to comment on specific barriers you've faced, such as financial challenges or the difficulties navigating post-secondary education as a first-generation college student.)				

# Part III: FINAL AGREEMENT AND UNDERSTANDING STATEMENT

By my signature, I certify that all information on this application is accurate and complete. I further certify that I have read and agree to all criteria, terms and conditions of this application including my responsibility to repay the entire amount of the awarded grant in the event that I do not successfully complete the program's clinical experience by the conclusion of the clinical experience. I acknowledge that I am responsible for determining whether receipt of this scholarship award will affect any financial aid that I am currently receiving. I further certify that I am a domiciliary Virginia resident and am enrolled in a Virginia approved teacher education program the current academic year as an undergraduate student or am enrolled as a student at the graduate level and meet the other eligibility conditions set forth in this "Application for a Paid Internship Scholarship for Aspiring Virginia Educators."

Signature	Date	
Print Name		