



Eugenio Maria de Hostos Community College  
Of The City University of New York  
500 Grand Concourse, Bronx, New York 10451  
Phone (718) 518-4156  
Fax (718-518-4242

## **THE PAULA L. ZAJAN TEACHER EDUCATION SCHOLARSHIP**

Dr. Paula L. Zajan, professor and founder of the Teacher Education Program, died in June 1988 after a courageous battle with cancer. Dr. Zajan was a dedicated teacher. She imparted her love of learning and teaching to students and left a bequest to the College to start a scholarship in her name. Because of her contributions, many individuals live richer lives. Her magnificent spirit continues in the legacy she left behind.

### **Criteria**

1. Be a graduating student with a cumulative index of 3.5, have taken a minimum of 12 credits in Education courses, and are pursuing a career in education at a senior college;
2. Be a returning student who due to family and/or financial reasons has not returned or is at-risk of not returning to the college and has the academic ability, character and potential for success in the field of education;
3. In-coming students that are being admitted to the Teacher Education program and have the academic ability, character and potential for success in the field of education.

Any student selected should have outstanding character in the judgment of the faculty and submit a completed application.

### **Application Procedure**

Applicants must do the following:

- Request two letters of recommendation from faculty members to be sent directly to the coordinator of the Teacher Education Program.
- Complete an application form
- Attach the following to the application form:
  - An up-to-date transcript and listing of courses in which you are currently enrolled.
  - A typed one-page statement stating your educational goals and how the scholarship would benefit you. Sign and date the statement .

Return the application and attachments in an envelope to the Teacher Education Program Office.

### **Attention:**

### **Distribution of Award**

- Graduate Student Criteria of the Teacher Education program who is continuing in an education program at an institution of higher education and will receive a scholarship of \$1,000 upon successful enrollment and demonstrated continued academic progress. Recipients will be given one-half of the award after they provide The Paula L. Zajan Scholarship Committee with proof of registration for the Fall semester in a senior college and the other half after they provide an official transcript that is satisfactory to the committee for the Fall semester and proof of registration for the Spring semester.
- Returning Education Student Criteria the students who have been enrolled in the program, had been working hard to complete their degree but have encountered financial and/or family difficulties that limit their enrollment this coming year in our program. These students will be assigned assistantships with the Chairperson of the Department to insure monitoring of their academic progress and provide them with an experiential environment that will enable them to acquire additional skills in preparation for success in the field of education. Funds will be allowed to cover tuition, fees, and books, childcare and other directly related expenses upon enrollment and demonstrated continued academic progress.

### **For Information**

**Contact:** Education Department Attn: Ms. Luz Rivera  
Room #: A-107E Telephone: (718) 518-4156



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Application Form

Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Number and Street

\_\_\_\_\_ City State Zip Code

Telephone: ( ) ( )  
Home Business

I.D. # \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Expected Date of Graduation: \_\_\_\_\_

Degree:  A.A.  A.A.S.

Number of EDU credits completed: \_\_\_\_\_ GPA: \_\_\_\_\_

Number of EDU credits being taken this semester: \_\_\_\_\_

College to which you intend to transfer: \_\_\_\_\_



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**THE PAULA L. ZAJAN TEACHER EDUCATION SCHOLARSHIP**

Letter of Recommendation from a Faculty Member

Name: \_\_\_\_\_  
Last    First    Middle

ID No.: \_\_\_\_\_

*The above named student is applying for the Paula L. Zajan Scholarship. Please provide and appraisal of this student's scholarship and personal characteristics in the space below.*

Faculty Member's Name: \_\_\_\_\_  
Please Print

Faculty Member's Signature: \_\_\_\_\_

Date: \_\_\_\_\_



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Name: \_\_\_\_\_  
Last    First    Middle

ID No.: \_\_\_\_\_

Please type a typed one-page statement stating your educational and professional goals and how the scholarship would benefit you in the space provided below.