



Student Teacher Scholarship

The SCAAE offers a scholarship to be used for expenses related to student teaching. Please complete the following application and submit by email to the SCAAE Secretary.

Eligibility:

- Students must be enrolled in the Agricultural Education program at Clemson University.
 - They must be conducting their student teaching in South Carolina.

Due: By October 31st, 2025

Contact Information:

Beth Ann Melton
SCAAE Secretary
Battery Creek High School
1 Blue Dolphin Dr
Beaufort, SC 29906
elizabeth.melton@beaufort.k12.sc.us

**SCAAE Student Teacher Scholarship
Application**

Applicant's Name:

Applicant's Mailing Address:

City/State:

Zip Code:

Applicant's Telephone Number:

High School Chapter Name:

Agriculture Education Region:

High School Last Attended:

Graduation Date:

Number of Years in Agricultural Education in High School:

Expected College Graduation Date:

GPA:

Agricultural Education GPA (based on 4.0 scale)- (x5 points)

Total College GPA (based on 4.0 scale) (x5 points)

Total GPA Points: _____

What activities have you participated in on the Collegiate Level? (FFA or other organizations)
Examples include volunteering for CDEs, competing at Wildlife Conclave, tutoring, etc.

Name of Activity/Year(s)	5 pts each

Total Points for Activities: _____

Leadership Roles: Have you ever been an officer in the Collegiate FFA or other organization?

If so, what office or offices did you hold? (List all with years served.)

Office	Year

(5 points per office)

Total Points for Offices: _____

Teaching Philosophy (Worth up to 50 points) (May be attached on a separate sheet)

A brief reflective statement (not to exceed one page) of your personal teaching philosophy.

Total Statement Points: _____

Description of Need (Worth up to 50 points) (May be attached on a separate sheet)

Briefly explain why you are applying for this scholarship.

Total Statement Points: _____

Please list three personal references:

- | | |
|-----------------------------|------------------|
| 1. Name: | Relation: |
| Contact Information: | |
| 2. Name: | Relation: |
| Contact Information: | |
| 3. Name: | Relation: |
| Contact Information: | |

Please attach a resume to this application.

(Worth up to 25 points.)

Total Resume Points: _____

Total Application points: _____

Applicant Certification Statement

I certify that the above information is correct and truthful. I agree that if selected as a SCAAE Scholarship Award Winner I will use all funds for expenses related to student teaching. I further agree that I will present documentation of expenditures to the SCAAE upon request. I also agree to provide to SCAAE a minimum of five (5) photographs of my student teaching experience for use during the annual SCAAE Summer Conference.

Applicant's Signature (electronic): _____

Date: _____