

**ACCESS SCHOLARSHIP  
FOR NEW TEACHERS  
(Years 1 to 4)**

Name \_\_\_\_\_

Home Address \_\_\_\_\_

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

Email \_\_\_\_\_ Phone \_\_\_\_\_

School Name \_\_\_\_\_

School Address \_\_\_\_\_

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

**Please indicate the years you have been teaching:**

\_\_\_\_\_ 1st Year    \_\_\_\_\_ 2nd Year    \_\_\_\_\_ 3rd Year    \_\_\_\_\_ 4th Year

**Have you ever attended the IRC Conference?**    \_\_\_\_\_ Yes    \_\_\_\_\_ No

**Please check all that apply:**

_____ American Indian/Alaska Native	_____ Asian
_____ African American/Black	_____ Hispanic/Latino
_____ Native Hawaiian/Pacific Islander	_____ Middle Eastern
_____ White	_____ Other _____

**Does your school district provide any compensation for attendance?**    \_\_\_\_\_ Yes    \_\_\_\_\_ No

**Would attending the IRC Conference create a personal hardship?**    \_\_\_\_\_ Yes    \_\_\_\_\_ No

**Please submit a brief statement describing how attendance at the conference would be beneficial to you, your classroom, or your school.**

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**I verify that all submitted information is accurate.** \_\_\_\_\_

**Signature of Scholarship Applicant**

**The application must have an administrator's signature and contact information to verify information.**

**Signature of School Administrator** \_\_\_\_\_

**Position** \_\_\_\_\_

**Email** \_\_\_\_\_ **Phone** \_\_\_\_\_