

KOSA TEACHER CERTIFICATION *SCHOLARSHIP INFORMATION*

Purpose

The Kentucky Orff-Schulwerk Association will award one scholarship in the amount of \$475 for the purpose of enhancing the educational knowledge and skills of the recipient in the teaching of Orff-Schulwerk.

Eligibility

Any KOSA member or college student is eligible to apply.

Application Process

The application must be completed and returned by midnight on **February 17, 2011**. The application should be mailed to the KOSA secretary at the address listed below. A selection committee comprised of the KOSA president, a KOSA member, and a college/university representative will review all applications. The scholarship recipient will be announced at the March workshop.

Amanda Wells
385 Old Hilda Road
Morehead, Kentucky 40351
amanda.wells@rowan.kyschools.us

Responsibility of the Recipient

1. The recipient will attend and successfully complete the certification course.
2. The recipient will present at the Chapter Share workshop in January 2012.
3. The recipient will write an article after course completion about their experience in the Orff-Schulwerk Levels. This article will be published in KOSA's newsletter, *News & Notes* and will be submitted to KMEA for publication in *Bluegrass Music News*.

This scholarship must be repaid if any of the following circumstances should occur:

- The University of Kentucky cancels the course.
- The recipient fails to complete the course. (The selection committee would confer with the instructor concerning any situation, which might cause the scholarship to be revoked.)

I have read the above information regarding the KOSA Teacher Certification Scholarship. I understand that if I were unable to complete the course due to any of the above circumstances the moneys would be returned to the Kentucky Orff-Schulwerk Association.

Name: _____ Date: _____

Kentucky Orff-Schulwerk Association
Application for
The Orff-Schulwerk Teacher Certification Scholarship
The University of Kentucky Summer Certification Program

I. Personal

Name: _____
Last First Middle Initial

Address: _____

City: _____ **State:** _____ **Zip:** _____

Home telephone: ____ (____) _____

II. Educational Background

Name and address of college/university; dates attended; degrees earned

III. Employment

Position; employer; inclusive dates of employment

IV. Professional Activities and Associations

Please list any honors, recognitions, continuing education, and other relevant activities.

V. Interest in Orff-Schulwerk Teacher Training

Please explain your plans for the use of this scholarship including how the training might benefit you as well as those with whom you associate (pupils or other professionals). Please limit your comments to fit this page.

VI. References (3-5- include name, position, and contact information)

Signature: _____ **Date:** _____