

**HANOVER COUNTY SCHOOL BOARD**  
**SCHOLARSHIP APPLICATION - Area of Critical Shortage**

NAME \_\_\_\_\_ DATE \_\_\_\_\_

SCHOOL \_\_\_\_\_

Present Endorsement(s) \_\_\_\_\_  
 \_\_\_\_\_

Area of critical shortage for which endorsement is being sought:  
 List specifically required classes previously completed:

| Number | Name | College |
|--------|------|---------|
|        |      |         |
|        |      |         |
|        |      |         |

List specifically required classes to be taken, when they will be taken, cost of classes, and college at which they will be taken:

| Class Number   | Name | Year to be Taken | College | Tuition |
|----------------|------|------------------|---------|---------|
|                |      |                  |         |         |
|                |      |                  |         |         |
|                |      |                  |         |         |
| Total Tuition: |      |                  |         |         |

This application is to be filed in the office of human resources of the Hanover County Public Schools between June 1 and June 30 of each year.

I agree to abide by the requirements of the Hanover County School Board Policy and Regulations should I receive a scholarship under the scholarship assistance in areas of critical shortage.

Teacher \_\_\_\_\_ Date \_\_\_\_\_

For Office Use:

⊖ Scholarship granted in the amount of \_\_\_\_\_ ⊖ Scholarship denied.

Approved by School Board: \_\_\_\_\_ Date \_\_\_\_\_

## HANOVER COUNTY SCHOOL BOARD EDUCATIONAL ASSISTANCE AGREEMENT

THIS AGREEMENT, entered into this \_\_\_\_\_ day of \_\_\_\_\_, by \_\_\_\_\_, a teacher employed by the Hanover County School Board (the "School Board") and school board (hereinafter "the teacher").

### WITNESSETH:

In consideration of educational assistance provided to the teacher by the Hanover County School Board in the amount of \_\_\_\_\_, the teacher agrees that if he/she leaves School Board employment for any reason, including resignation or termination, prior to \_\_\_\_\_ years after completion of endorsement, he/she will pay to the School Board a proportionate amount of the total paid by the Hanover County School Board. Such amount shall be prorated on a weekly basis with reference to the length of time remaining in the time period referred to above and in Hanover County School Board Policy and Regulations regarding teacher educational assistance.

If the teacher fails for any reason to meet endorsement requirements prior to \_\_\_\_\_ (three years from date of receipt of initial scholarship), and if he/she leaves School Board employment for any reason, including resignation or termination, prior to \_\_\_\_\_ years after the three-year period has elapsed, the teacher shall pay to the School Board a proportionate amount of the total paid by the School Board, prorated as stated above.

WITNESS the following signature:

\_\_\_\_\_ (SEAL) \_\_\_\_\_  
**Signature** **Date**