Association of Retired Teachers of Connecticut GLENN MOON SCHOLARSHIP

For Future Educators

2026 Scholarship Application Directions/Checklist:

Using your computer, create <u>one</u> folder with **your name as the Title.** Include all the items listed below in **pdf format.**

- 1. Scholarship Application Form, only pages 2 and 3
- 2. **Essay** detailing reasons for choosing teaching as a career; your experience with teaching, tutoring, and/or working with students; and the subject(s) and level(s) you hope to teach
- 3. **Resume** Employment Experiences, Volunteer and Community Service, Extracurricular, Sports, and Other Activities, School Leadership and Awards and other Accomplishments
- 4. **Letters (2) of recommendation**, possibly school counselor, teacher, or other influential adult (not family member)
- 5. **Financial Need** Confirmation page displaying your SAI (Student Aid Index) and FAFSA Submission Summary (FSS)
- 6. **High School Transcript** including Grade 9 through 1st semester of senior year, GPA and class ranking if available.

LATE OR INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.

EMAILING INSTRUCTIONS

- 1. Go to the website www.artct.org
- 2. Then click on Glenn Moon Scholarship.
- 3. Find "Get Started #2" to find the email address for the Glenn Moon Board Member for your area of Connecticut.

If there are questions or additional information is needed, please check our website www.artct.org. If more help is needed, email glennmoon.scholarship@gmail.com Be sure to include your (the student's) town and school as well as your question(s). Please include your phone number, in case we think it is best to talk with you.

Email your complete application in pdf format no later than March 31, 2026.

You should receive a confirmation from the Board Member who received your application.

Winners will be announced in May 2026 at www.artct.org.

ARTC GLENN MOON SCHOLARSHIP For Future Educators 2026 Scholarship Application Form

Applicant Information

Full Legal Name			
Birthdate	Graduation date (month & year)		
Address Street & Town:			
Phone Number: Home	Ce	ell	
Applicant's Email Address _			
Name of High School (and to	own)		
School Counselor		Phone	
School Counselor's email ad	dress		
	ation(s). If you have deci	e(s) to which you have applied ided the college/unv. you have	
<u>College</u>		<u>Status</u> (Check one)	
College		pending accepted	
Financial aid from this college:	Scholarships/Grants \$	Work Study \$	
College		pending accepted	
Financial aid from this college:	Scholarships/Grants \$	Work Study \$	
College		pending accepted	
Financial aid from this college: S	Scholarships/Grants \$	Work Study \$	
Anticipated Teaching level after	college graduation:		
Anticipated Subject(s) to teach	after college graduation:		

Family Information

Parent/Guardian Name	Relationship
Address	Phone
Job/Occupation/Company or Employer_	
Parent/Guardian Name	Relationship
Job/Occupation/Company or Employer_	
Address	Phone
Parent/Guardian Name	Relationship
Job/Occupation/Company or Employer_	
Address	Phone
Siblings/# and Ages	# in college next year including you
Please inform us of any extenuating circ	cumstances or financial need that might be important
for us know.	
The undersigned hereby certifies application is true to the best of h	that the information provided in this is/her knowledge.
STUDENT APPLICANT SIGNATURE	DATE
PARENT(S) / GLIARDIAN(S) SIGNATURE(S)	

Email your complete package no later than March 31, 2026.