



## *Canton Professional Educators' Association*

*1327 Market Avenue, N.*

*Canton, Ohio 44714*

---

### **CPEA MEMORIAL SCHOLARSHIP**

1. Applicant must be the natural or adopted child of a CPEA member.
2. The parent of the student must request the application form and guidelines from the CPEA Office.
3. The amount of the scholarship will be \$1,000.00.
4. Applicants may be graduating high school seniors or students already enrolled in an academic plan (college, 2-year vocational, technical, or advanced study).
5. High school applicants must have a cumulative grade point average of 3.0 or above, and college students must be "a student in good standing". All High School applicants must submit a verified current transcript with their application. College students must submit official verification that they are in "good standing".
6. Applicants must be full-time students while enrolled in college.
7. Scholarship is for one year.
8. Applications for the scholarship must be in the CPEA Office by 4:30 p.m. on **Friday, May 2, 2025.**
9. Reimbursement is required if the student does not attend school as planned.
10. A random drawing will be conducted from the applications at the CPEA Building Rep. meeting on May 5, 2025 and the winners announced at that time.
11. **Recipients are not eligible to receive the scholarship two years in a row.**

**"CPEA MEMORIAL SCHOLARSHIP"**

**CPEA MEMBER:**

NAME \_\_\_\_\_

Last

First

Middle

ADDRESS \_\_\_\_\_

Number

Street

City

Zip Code

SCHOOL/BLDG \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL: \_\_\_\_\_

**RELATIONSHIP TO APPLICANT:**

Parent \_\_\_\_\_ Legal Guardian \_\_\_\_\_

**APPLICANT'S:**

NAME \_\_\_\_\_

Last

First

Middle

ADDRESS \_\_\_\_\_

Number

Street

City

Zip Code

PHONE \_\_\_\_\_ E-MAIL \_\_\_\_\_

\*\*\*\*\*

**Complete this portion if applicant is graduating from high school\*:**

NAME OF HIGH SCHOOL \_\_\_\_\_

DATE OF GRADUATION \_\_\_\_\_

WHAT IS YOUR CUMULATIVE GRADE POINT AVERAGE? \_\_\_\_\_

**\*An official transcript of grades must be sent to the CPEA Office in conjunction with this application.**

(OVER)

\*\*\*\*\*

**Complete this section if applicant is currently enrolled in a continuing educational program beyond high school.**

I AM PRESENTLY A FULL-TIME STUDENT AT: \_\_\_\_\_

PROJECTED DATE OF GRADUATION \_\_\_\_\_

**Evidence of being a student in good standing must be sent to the CPEA Office in conjunction with this application.**

\*\*\*\*\*

Applications for the scholarship must be in the CPEA Office by 4:30 p.m. on **Friday, May 2, 2025.**

The random drawing will be conducted from the applications at the CPEA Building Rep. meeting on May 5, 2025 and the winners will be announced at that time.

We do hereby apply for the CPEA Memorial Scholarship. The above information is true to the best of our knowledge.

If selected, I agree to sign an "Acknowledgement of Scholarship Grant and Guarantee of Use For Intended Purpose" form.

**Recipients are not eligible to receive the money two years in a row.**

CPEA Member's \_\_\_\_\_  
Signature Date

Applicant's \_\_\_\_\_  
Signature Date