



“GGEA is an association of educators who advocate for the well-being of our membership, and the students we serve.” – Mission Statement

## Garden Grove Education Association Scholarships

**The Garden Grove Education Association (GGEA)** was established in 1965. GGEA represents approximately 2,000 members who work in the Garden Grove Unified School District. The Association represents teachers, nurses, and librarians. These seven scholarships are provided from the dues of GGEA members.

### **\*Garden Grove Unified School District Graduating Seniors (4)**

Applicants may be considering any field of study, but must be entering a vocational/trade school, community college, four-year college, or university in the Fall of their high school graduation year.

### **\*Graduating Seniors of a Garden Grove Education Association (GGEA) member (2)**

Applicants may be considering any field of study, but must be entering a vocational/trade school, community college, four-year college, or university in the Fall of their high school graduation year.

### **\*Arlene Pavey Scholarship (1)**

#### **Graduating Senior of a Garden Grove Education Association (GGEA) member**

In 1964, Arlene Pavey began her career with Garden Grove Unified School District. In her 36 years of teaching in GGUSD, she became an active, forceful member of GGEA in the roles of Chair of the Bargaining Committee, Vice President, and President. While serving as GGEA President, she was instrumental in shepherding a collective bargaining bill signed into law by Governor Edmund G. Brown, Jr.



Arlene was also an integral and proud member of the California Teachers Association (CTA) and the National Education Association (NEA). She served on the CTA Board of Directors and was Chair of the Federal Legislative Committee in charge of negotiations. In 1983, she received the prestigious “Ted Bass Honorary Teacher of the Year” Award in Politics.

Arlene was a GGEA delegate to the annual NEA Representative Assembly for 45 years. She also served as Vice President and President of the National Council for Urban Education (a nationwide caucus of NEA) and traveled extensively to contribute her wisdom and input. She served on the NEA Board of Directors and was a member of the NEA Bargaining Committee. Arlene was also a Board member for International Educational Organization in Australia, England, and Slovenia.

In Arlene’s retirement years she served as Secretary, Treasurer, and President of the Retired California Teachers Association (CTA/NEA-Retired). With her skillful guidance, she helped to grow the membership of this organization to 5,000 members!

Applicants for this scholarship must have the passion to pursue a career in education.

GARDEN GROVE EDUCATION ASSOCIATION  
Scholarship Application - 2024

NAME \_\_\_\_\_

**DEADLINE: Monday, March 1, 2024, 5:00 p.m.**

SCHOOL \_\_\_\_\_

SCHOOL COUNSELOR \_\_\_\_\_

Applicants must be entering a vocational/trade school, community college, four-year college, or university in the Fall of 2024. Criteria for selection includes financial need, academic achievement, community service, school activities, and personal interviews.

The scholarships are \$2,000 each and will be paid at the beginning of the 2024 Fall semester. Scholarship winners must turn in proof of registration as a full-time college student to receive funds.

**INSTRUCTIONS FOR APPLICATION: (All information is strictly confidential)**

- \_\_\_ 1. Complete the attached application **pages 1-8**. Applications with incomplete information will be rejected.
- \_\_\_ 2. Request that your school send an official transcript of your records to the GGEA office. (Transcript must include grades from first semester of senior year, G.P.A, and class ranking.)
- \_\_\_ 3. Submit a copy of the **last filed income tax return** (first page, block out SSN & signature page + W2 block out SSN) for proof of income of parent/guardian: (check one)  
 **2024 Income Tax Return**       **2023 Income Tax Return**

**If exempt from filing, submit one of the following: AFDC (Aid to Families with Dependent Children), SSI/Disability (Supplemental Security Income, TANF (Temporary Assistance for Needy Families)**

**\*\*Students with a job please include your individual income tax return.**

**Application is incomplete without the necessary forms for proof of income.**

- \_\_\_ 4. Submit three (3) recommendation forms to individuals of your choice. Two (2) must be from school personnel, and **one (1) must be from another adult (not a classmate or relative) in the community outside of school.**  
**\*\*\* RECOMMENDATIONS NOT IN A SEALED ENVELOPE WILL NOT BE READ BY THE COMMITTEE\*\*\***

<u>NAME</u>	<u>PLACE OF EMPLOYMENT</u>	<u>POSITION</u>	<u>PHONE #</u>
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(School Personnel) \_\_\_\_\_

(School Personnel) \_\_\_\_\_

(Other Non-School Personnel) \_\_\_\_\_

- \_\_\_ 5. Your counselor must sign page 3 of this application to verify your school activities.
- \_\_\_ 6. Applicants are responsible for mailing or hand delivering applications to the GGEA office by **Monday, March 1, 2024 at 5:00 p.m.** Call (714) 638-7480 with any questions.  
 GGEA Office, Scholarship Committee  
 12912 Brookhurst St, Suite 360  
 Garden Grove, CA 92840

- \_\_\_ 7. All semi-finalists must be available for personal interviews with the Scholarship Committee at the GGEA office on **Friday, Apr 26, 2024** in the morning or they will be disqualified.
- \_\_\_ 8. Return this entire form with your application.

GARDEN GROVE EDUCATION ASSOCIATION

Scholarship Application (Postmark or deliver by Monday, March 1, 2024 - 5:00 P.M.)

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Student's email address: \_\_\_\_\_

Parent(s) or Guardian(s) \_\_\_\_\_

Father's Occupation \_\_\_\_\_ GGEA Member: Yes / No School \_\_\_\_\_

Mother's Occupation \_\_\_\_\_ GGEA Member: Yes / No School \_\_\_\_\_

Number of dependents under 21 in family \_\_\_\_\_

List immediate family members attending college:

<u>Name</u>	<u>College</u>	<u>Age</u>	<u>Full or Part-time</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Family Gross Annual Income: \_\_\_\_\_ Residence: Own \_\_\_\_\_ Rent \_\_\_\_\_

X  
Parent/Guardian signature for verification of income. **(Application is incomplete without signature.)**

List all grants, scholarships, loans, or other financial assistance for which you have applied.

\_\_\_\_\_  
\_\_\_\_\_

**Do you have an outside job?** \_\_\_\_\_ If yes, hours per week \_\_\_\_\_ Approximate salary per week \_\_\_\_\_

Length of time at present job \_\_\_\_\_ Job description \_\_\_\_\_ Employer \_\_\_\_\_

Address \_\_\_\_\_ Phone # \_\_\_\_\_

**If you do not have a job, please explain** \_\_\_\_\_

An important criteria for selection is the demonstration of financial need. Please explain why you need this scholarship. Also include how you plan to supplement your education expenses.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**LIST ALL ACTIVITIES YOU HAVE BEEN INVOLVED IN FOR THE LAST FOUR (4) YEARS.**

The following information is true and correct.	
X _____ Student Signature	X _____ Counselor Signature

**A. ACTIVITY RECORD FOR SCHOOL (Please indicate all offices held.)**

SPORTS, CLUBS, ASB, PERFORMING ARTS, ETC. (not including class time)	List number of <b>HOURS</b> per year			
	9 <sup>th</sup>	10 <sup>th</sup>	11 <sup>th</sup>	12 <sup>th</sup>
<i>Sample: baseball or dance (practices outside of school hours &amp; games)</i>		98	113	103

**B. ACTIVITY RECORD FOR COMMUNITY/VOLUNTEER SERVICE**

SPECIFIC EVENTS AND HOURS (not including class time)	List number of <b>HOURS</b> per year			
	9 <sup>th</sup>	10 <sup>th</sup>	11 <sup>th</sup>	12 <sup>th</sup>
<i>Sample: Religious education teacher at church</i>		25	25	

AWARDS, HONORS, ACHIEVEMENTS	Place an X in grade column for year received			
	9 <sup>th</sup>	10 <sup>th</sup>	11 <sup>th</sup>	12 <sup>th</sup>
<i>Sample: World Language Student of the Quarter</i>		X		

**PERSONAL ACHIEVEMENTS** *Sample: learned to play an instrument, ran a marathon, Eagle Scout, Gold Award,*

*etc.*

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**INTENDED SCHOOL OF ATTENDANCE**

**FIRST CHOICE**

Name of College \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Intended field of study/major \_\_\_\_\_

Tuition	Books	Board/Room	Total Costs	Amount of Loans/Scholarships

Why do you want to attend this college? \_\_\_\_\_

Accepted:    Yes \_\_\_\_\_    No \_\_\_\_\_    Not yet notified \_\_\_\_\_

Do you plan to live at home?    Yes \_\_\_\_\_    No \_\_\_\_\_

Explain \_\_\_\_\_

**ALTERNATE CHOICE**

Name of College \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Intended field of study/major \_\_\_\_\_

Tuition	Books	Board/Room	Total Costs	Amount of Loans/Scholarships

Why do you want to attend this college? \_\_\_\_\_

Accepted:    Yes \_\_\_\_\_    No \_\_\_\_\_    Not yet notified \_\_\_\_\_

Do you plan to live at home?    Yes \_\_\_\_\_    No \_\_\_\_\_

Explain \_\_\_\_\_

Based on your financial status, which school have you chosen to attend?  
\_\_\_\_\_

Have you applied for aid directly from this college? \_\_\_\_\_ What kind? \_\_\_\_\_



**GARDEN GROVE EDUCATION ASSOCIATION/CTA/NEA  
SCHOLARSHIP RECOMMENDATION**

**Please use the form below OR submit a letter of recommendation. Recommendations must NOT be given to the student. Please place the recommendation in a sealed envelope with your signature on the back and mail or deliver to the address below. You may use district mail, too. DUE to GGEA office by Monday, MARCH 1, 2024.**

This is a recommendation for \_\_\_\_\_ of \_\_\_\_\_  
High School who is applying for the Garden Grove Education Association (GGEA) Scholarship.

	Average	Above Average	Out-standing	<b>Please give your honest opinion of this student.</b>
Academic Potential *				
Attendance *				
Leadership *				
Initiative *				
Reliability *				
Integrity *				
Enthusiasm *				
Attitude towards others *				
Attitude towards self *				
Civic responsibility *				
Organization *				
Originality *				
Financial need *				

\* If you have not had a chance to observe any of these qualities, please write N/A.

Additional comments that may be helpful to the Scholarship Committee in making their selection: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name \_\_\_\_\_ Signature \_\_\_\_\_ Phone # ( ) \_\_\_\_\_  
Address \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
Place of employment \_\_\_\_\_ Position \_\_\_\_\_  
Relationship to Applicant \_\_\_\_\_

Mail to: GGEA Scholarship Committee  
12912 Brookhurst St., Suite 360  
Garden Grove, CA 92840

**GGUSD teachers may use district mail.**

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Financial need *				

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Additional comments that may be helpful to the Scholarship Committee in making their selection: \_\_\_\_\_

Name \_\_\_\_\_ Signature \_\_\_\_\_ Phone # (    ) \_\_\_\_\_

Address \_\_\_\_\_

Street

City

Zip

Place of employment \_\_\_\_\_ Position \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_

Mail to: GGEA Scholarship Committee  
12912 Brookhurst St. Suite 360  
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