Educational Assistant Application for Education Stipend

**Stipend Description:**
The Saint Paul Federation of Teachers and Saint Paul Public Schools agree that Educational Assistants are an integral part of the District community and that providing assistance to become classroom teachers in Saint Paul Public Schools can strengthen and help diversify the teaching force. The Educational Assistant collective bargaining agreement includes the award of 10 stipends of $2500 each to Educational Assistants who are in school to complete a “teaching” license (teacher includes any licensed position in a school, i.e. counselor, social worker, etc.) This stipend is to be used toward their school expenses.

**Qualifications:**
An Educational Assistant may apply for an Education Stipend after completing a minimum of two years of employment with Saint Paul Public Schools.

Applicants must submit the following information to be considered for a stipend:
1. The attached completed application form.
2. Verification of acceptance into a post-secondary institution.
3. A current resume.
4. An official transcript from any accredited college or university you have attended.
5. A short essay (at least 250 words) answering the questions:
   a. Why do you want to be a teacher in Saint Paul Public Schools?
   b. As a teacher, how will you use your experience as an educational assistant to ensure high academic achievement for all students?

**Application Deadline:**
Applications deadlines are November 20 and May 1 (or the following business day) each school year. Applicants will be notified of selection the following month (December or June).
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Please complete the following information:

Name: ________________________________________________________________

Employee Number: _______________  Job Title: ________________________________

School/Program: _______________________________________________________

Email Address: ______________________________________  Phone Number: __________________

How many years have you been employed as an Educational Assistant?
_____________________________________________________________________

What license are you seeking?
_____________________________________________________________________

What licensure program are you enrolled in and at what institution?
_____________________________________________________________________

When did you start your program?
_____________________________________________________________________

What is your projected end date for achieving licensure?
_____________________________________________________________________

I have read and agree to all the provisions for accepting an Education Stipend. I certify that the information provided on this application and in supporting documentation is complete, accurate and true to the best of my knowledge.

Signature: _______________________________________________  Date: ____________

Please return all completed application materials to:
Melissa Smolik
Human Resource Department – Saint Paul Public Schools
360 Colborne Street, St. Paul, MN  55102

Educational Assistant Stipend Application – May, 2014