



MARK LAUBER SCHOLARSHIPS FOR TEACHERS Program Description

The Dover City Schools Education Foundation, on behalf of the family of the late Mark Lauber, is sponsoring a scholarship program that will give classroom teachers an opportunity for further study and training. The purpose of the program is to enhance the quality of education by helping teachers receive advanced training and develop additional skills that will improve their ability to work with students in the classroom.

The scholarship program is open to classroom teachers currently employed by Dover City Schools and who have a minimum of two years of classroom teaching experience. The scholarship can be used for study or training in the following areas:

- Special courses in specific subjects or technical training in specific areas which are directly related to teachers' classroom subject or area of interaction with students.
- Participation in specific teacher training opportunities which will enhance the teacher's ability to work with students in the classroom. These may be provided by arts organizations, research or medical organizations, or libraries or technical training organizations.

Any program that directly affects the classroom activities will be considered.

Fees for travel and living expenses will be considered for those programs of short duration for which travel is required. It is expected that the training programs will occur during the summer vacation, but other programs during the school year may be considered. The maximum award for any one year (June 1-May 31) will be \$1,000. A commitment for two complete years of classroom teaching in the Dover City School District following the training will be required.

Interested teachers can receive an application for the Lauber Scholarship by downloading the application from the Dover Education Foundation web page.

The deadline for the 2024-2025 applications will be May 10th, 2024, with notification of grant decisions by approximately June 1st, 2024.

The Dover City Schools Education Foundation, Inc, will administer this scholarship program. Any questions about the program should be directed to Brooke Grafe or any member of the Dover City Schools Education Foundation, Inc., Board of Trustees (doverfoundation.com).

All information contained in the application form will be confidential, although a press release will be issued about those teachers who are awarded Lauber Scholarship money.

MARK LAUBER SCHOLARSHIP FOR TEACHERS

Application Form

Please read the cover sheet that describes those eligible for this scholarship and the programs that will be considered for funding. The application includes the following four parts:

1. Identification and Personal Information. Please complete the attached application cover sheet that provides basic information for the scholarship committee.
2. Education and Teaching Experience. Please provide a personal resume that lists your educational background (colleges, degrees, courses of study, graduation dates) and your teaching experience (schools, positions, courses taught). Include any other job experience that is related to your current teaching position.
3. Proposed Program of Study. Please write a one-page description of the program of study for which you are applying and why you think it will improve your ability to work with your students. Please give specific details about the program.
4. Recommendation. Please provide a letter from your principal of your current school or the superintendent of your school system that recommends you for this additional training and confirms the value of this training to the students.

All four parts of the application should be submitted together. Incomplete applications will not be considered. Please clearly label each submitted page with your name. Typed applications are easier for the selection committee to review. **All parts of the application should be received by no later than May 10th, 2024.**

Mail or deliver applications to:

Brooke Grafe, DCSEF, Inc.
Dover High School
520 North Walnut Street
Dover, Ohio 44622

**MARK LAUBER SCHOLARSHIP FOR TEACHERS
APPLICATION COVER SHEETS**

Name: _____

Permanent Address: _____

Telephone: _____ Fax: _____

E-Mail Address: _____

Dover City Schools Staff ID Number: _____

Current School and Position: _____

School Mailing Address: _____

_____ County: _____

E-Mail Address: _____

College or Program for which scholarship will be used: _____

(Attach any specific program description available)

What degree or certification will be received? _____

Have you been accepted for this program? _____

Do you have other financial assistance for this study? _____

If yes, please describe _____

Is receipt of this scholarship necessary for you to participate in this program? _____

Estimate your remaining education debt stemming from undergraduate work (in thousands of dollars) _____

Financial Information for the program:

Tuition and Fees: _____

Books: _____

Equipment: _____

Travel Expense: _____

Room, Board: _____

Other: _____ (describe)

I believe that the information contained in this application is true and accurate. I also understand that if I receive any scholarship award from the Dover City Schools Education Foundation, Inc., my name and photograph may be published by the media and in promotional materials, newsletters, solicitation letters and the like. I hereby release this information and my photograph or likeness to the Dover City Schools Education Foundation, Inc., and its assigns, and I grant my consent to the publication of this information and my photograph for news, solicitation and promotional purposes.

_____ Agree _____ Disagree

Signature

Please attach parts 2, 3, and 4 of the application to these cover sheets.