Educational Grant Application
School Year 2024-2025

Please complete the following information and submit your application to Ms. Michele Shipton, mshipton@archphila.org

Last name, first name, middle initial

Home Address

Phone

2023-2024 School where Assigned

System Seniority (number of years)

Degree or Program for which you seek an Educational Grant

College/University

Course Title

Start Date

End Date

Tuition Cost Per Course

Course Title

Start Date

End Date

[ ]

Tuition Cost Per Course

[ ]

If the application is for the Praxis Exams, indicate which Praxis Exam(s)

[ ]

If the application is for the Praxis Exams, indicate your Pennsylvania Instructional Certificate Type and Date Issued

[ ]

If the application is to convert a Level I PA State Teaching Certificate to a Level II PA State Teaching Certificate, please identify the subject area(s) for which this certificate is being issued.

[ ]