

**Special Education and Communication-Interdisciplinary Training  
SPEAC-IT**

**SCHOLARSHIP APPLICATION FORM  
Teacher Leader Master's Candidates**

**Department of Early Childhood, Special Education, and Rehabilitation Counseling  
University of Kentucky**

**Directions: Fill In All Blanks. Please Type Or Print.**

Name: \_\_\_\_\_ Application Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home/cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Have you been admitted to the Graduate School at the University of Kentucky?

YES

NO

**List previous education.**

Degree Earned	Major	Date of Graduation
College/University Attended		

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Are you currently teaching?

YES

NO

How many years you have taught? \_\_\_\_\_

All students receiving tuition support from a federally funded training grant are required to enter into a written service obligation agreement with the U.S. Department of Education, Office of Special Education and Rehabilitation Services. In this agreement, scholars are required to repay the scholarship by working in their field of study for 2 years for every academic year of support.

How many years have you been a paraprofessional? \_\_\_\_\_

**List relevant work experiences beginning with the most recent.**

Employer	Location	Position	Dates

**List relevant volunteer activities.**

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**List professional organizations to which you belong.**

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**List the goals you would like to accomplish as a result of the Scholarship.**

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**How did you hear about this scholarship program?**

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**Summarize your experience with presentations, publications, consultations.**

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**List any relevant leadership positions you have held. (e.g. department chair, team leader).**

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By signing this application, I understand that before receiving federal funds that I must enter into a written service obligation agreement with the U.S. Department of Education. In this agreement, I must repay the scholarship by working in the field of disabilities for 2 years for every academic year of support, or I will have to repay the money to the U.S. Department of Education.

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**Signature**

**Date**

**ALL STUDENT COHORTS BEGIN IN THE FALL SEMESTER. YOU MUST APPLY AND BE ADMITTED TO THE GRADUATE SCHOOL BEFORE YOU CAN BEGIN COURSEWORK. FOR INFORMATION, GO TO**

<https://education.uky.edu/edsrc/scholarship/>

Scroll to Special Education and Communication Disorders-Interdisciplinary Training (SPEAC-IT)

For Special Education and Shared Interdisciplinary Course Sequence, go to

<https://education.uky.edu/edsrc/wp-content/uploads/sites/5/2018/02/Speac-it-Course-Sequence-1.pdf>

**E-MAIL or MAIL THIS COMPLETED APPLICATION FORM TO:**

Melinda J. Ault, Ph.D. (mjault@uky.edu)  
Department of Early Childhood, Special Education, and Rehabilitation Counseling  
229 Taylor Education Building  
University of Kentucky  
Lexington, KY 40506-0001

If you have any questions, contact one of the following:

Margaret E. Bausch, Ed.D. (meb@uky.edu)

Melinda Jones Ault, Ph.D. (mjault@uky.edu)

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