

HARDING UNIVERSITY
GRADUATE STUDIES IN EDUCATION

Educators Scholarship Application

For NTL and MAT with Secondary License Candidates

This form must be completed each school year.

I, _____, am applying for the Educators Scholarship for graduate classes for the ____ - ____ school year.

I plan to seek (check one of the following):

- MAT with Secondary License**
- Non-Traditional Licensure** – I understand that upon completion of taking required coursework and passing the Praxis I and II, I must apply to the non-traditional licensure program with the Arkansas Department of Education.

Student Signature _____

Date _____

Social Security Number _____

Email _____

Home Mailing Address

Home Phone _____

Return this form and verification to:

Chair of Graduate Studies in Education
Harding University
Box 12261
Searcy, AR 72149-2261
Fax: 501-279-4051

Approved

Date