



NEW YORK ASSOCIATION FOR PUPIL TRANSPORTATION

1764 Route 9 / P.O. Box 356 / Clifton Park, NY 12065 / 518.463.4937 / www.NYAPT.org

NYAPT

Our future is riding with us!

NEW YORK SCHOOL TRANSPORTATION EDUCATION SCHOLARSHIP

NOMINATION INFORMATION:

1. The applicant must be the son/daughter of school transportation department personnel working in New York State, or an adult employed by a school bus operator in New York State.
2. For Student applicants you must:
 - a. Be a graduating senior with an average grade of 75 or higher, who intends to extend his/her education or training beyond high school.
 - b. Enclose/send a High School Transcript.
 - c. Have a parent/guardian employed by a school bus operator that is a current Active Member of NYAPT at the time of the application and award.
3. For adult applicants you must:
 - a. Be employed by a school bus operator at the time of the scholarship award.
 - b. Demonstrate that you intend to enroll in a SBDI or 19-A certified examiner program. SBDI and 19-A certified examiner program scholarships are awarded in the amount of the course fee. **OUR THANKS TO THE PUPIL TRANSPORTATION SAFETY INSTITUTE (PTSI) FOR SPONSORING THESE TWO SCHOLARSHIPS!**
 - c. Be an Active Member of NYAPT or employed by a school bus operator at the time of the application and award that is currently Active Member of NYAPT.
4. All applicants:
 - a. Include at least three (3) letters of recommendation from a teacher, counselor, principal, clergy, employer, etc.
 - b. In a maximum narrative of 350 words, on a separate paper please include why you think you deserve this award and information on school activities, honors, awards, clubs, extra-curricular activities, volunteer services and work experience and related activities. Please include goals you have set for yourself.
 - c. The completed application must be postmarked by March 31, 2019, to:

NYAPT/NY School Transportation Education Scholarship

- d. All applications postmarked after March 31, 2019, will be returned.
5. Scholarship Awards are for course work to be taken after August 1, 2019.

Awarded scholarship payments for students (\$1,000 per scholarship) will be made upon submission by the recipient to NYAPT of a Bursar's Tuition receipt for the fall semester of the school year following the award. ** No payments can be made without this documentation. **

6. 19-A and SBDI Scholarship recipients must use the scholarship to enroll in a class that will be held PRIOR to June 30, 2020. No exceptions can be made to this requirement.

NYAPT is dedicated to the support, development and representation of pupil transportation professionals.

AWARD & SCHOLARSHIP APPLICATION



NEW YORK ASSOCIATION FOR PUPIL TRANSPORTATION

1764 Route 9 / P.O. Box 356 / Clifton Park, NY 12065 / 518.463.4937 / www.NYAPT.org

NYAPT

Our future is riding with us!

NEW YORK SCHOOL TRANSPORTATION EDUCATION APPLICATION

Check Category: High School Senior Adult Working in Transportation

APPLICANT NAME: _____

HOME ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ CELL PHONE: _____ EMAIL: _____

1. PRINT NAME OF PARENT/GUARDIAN (if student): _____

SIGNATURE OF PARENT/GUARDIAN (if student): _____

TITLE OF POSITION HELD BY PARENT/GUARDIAN: _____

SCHOOL DISTRICT/EMPLOYER: _____

ADDRESS OF SCHOOL DISTRICT: _____

CITY: _____ STATE: _____ ZIP: _____

2. NAME OF HIGH SCHOOL GRADUATING FROM: _____

COUNTY IN WHICH HIGH SCHOOL IS LOCATED: _____

DATE OF GRADUATION ANTICIPATED: _____

NAME OF GUIDANCE COUNSELOR: _____

COUSELOR EMAIL: _____

3. NAME OF COLLEGE YOU PLAN TO ATTEND: _____

WHICH IS LOCATED IN: _____

4. COURSE OF STUDY: _____

5. ADULT WORKING IN TRANSPORTATION, PLEASE CHECK SCHOLARSHIPS FOR WHICH YOU ARE APPLYING.
APPLICANTS MAY APPLY FOR BOTH. *(Our thanks to PTSI for their support of these scholarships!)*

19-A CERTIFICATION

SBDI TRAINING PROGRAM

APPLICANT SIGNATURE: _____ DATE: _____

TRANS. DIRECTOR SIGNATURE: _____ DATE: _____

NYAPT is dedicated to the support, development and representation of pupil transportation professionals.

AWARD & SCHOLARSHIP APPLICATION