

**ORANGE UNIFIED EDUCATION ASSOCIATION RETIREES 2025/2026  
SCHOLARSHIP APPLICATION**

**CLASS/CONFERENCE COSTS SHOULD NOT HAVE BEEN INCURRED PRIOR TO  
JUNE 2024**

1. My Information:

\_\_\_\_\_

*First Name*

*Middle*

*Last*

\_\_\_\_\_

*Number and Street*

\_\_\_\_\_

*City*

CA  
*State*

\_\_\_\_\_

*Zip*

\_\_\_\_\_

*Home/Cell Phone*

\_\_\_\_\_

*Personal Email Address*

- First time applicant
- Prior applicant date \_\_\_\_\_

2. Name of school(s) current teaching position, immediate supervisor.

\_\_\_\_\_

*Name of school or location/Grade level and/or subject area*

3. Length of service in OUSD. \_\_\_\_\_

4. Name of conference/class? Attach copy of flyer, if possible.

\_\_\_\_\_

5. Name of institution/organization providing educational opportunity.

\_\_\_\_\_

6. Reimbursement amount up to \$500? \_\_\_\_\_

- By completing this application, you agree to have your name published in the newsletter, and any OUSD Retirees social media, if you receive a scholarship.
- I understand that no funds shall be transmitted until proof of completion of the course is presented to the Committee with cost incurred.
- I HEARBY AFFIRM that I am a **current active member** of the Orange Unified Education Association.

\_\_\_\_\_

Signature of Applicant

\_\_\_\_\_

Date

**ORANGE UNIFIED EDUCATION ASSOCIATION RETIREES 2025/206  
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Please complete an explanation of how this conference/class benefits you and/or your students.  
Be specific.