

APPLICATION FORM
BILL GIBBS ENDOWMENT FUND/RA REARWIN SCHOLARSHIP FUND

Instructions:

To be completed by the student. Please fill out this form in its entirety to ensure a fair and complete evaluation of your application. Please make only **single-sided** copies of this application. Please mail or hand deliver **this form**, a minimum of **three completed science and/or math Teacher Evaluation Forms** (Page 3 and 4), and **The Essay** described on Page 2, and an official transcript in one envelope, **not later than April 1, 2009** to:

Bill Gibbs Endowment Fund/RA Rearwin Scholarship Fund
c/o San Diego Air & Space Museum
2001 Pan American Plaza
San Diego, California 92101-1636

Student's name: _____ (Print)

Student's address: _____ (Print)

Student's home phone: () _____

Name of student's parent or guardian: _____

Name of high school & district: _____

Unweighted grade point average: (Through last academic period) _____

Enclose an official transcript.

SAT Scores: Math _____ Verbal _____ /ACT Composite Score: _____

Do not include writing scores.

Signed _____ (Academic Counselor) Date _____

List all Science and Math courses for grades 9 - 12

Student's name _____ (Print)

Teacher's name _____ (Print)

SCIENCE AND/OR MATH TEACHER EVALUATION FORM
BILL GIBBS ENDOWMENT FUND/RA REARWIN SCHOLARSHIP FUND

This form is to be provided by students applying for a San Diego Air & Space Museum BILL GIBBS ENDOWMENT FUND/RA REARWIN SCHOLARSHIP FUND Scholarship, to a **minimum of three** mathematics and/or science teachers for completion. Evaluations by teachers of other courses familiar with the student's scholastic performance and promise may be submitted. Please make enough copies (single sided) of this form to provide one to each teacher who is asked to make an evaluation. *Please note that the deadline for application is April 1, 2009. It is imperative that all teacher evaluation forms be submitted with the application form: do not mail separately.*

Teachers are requested to respond to the following as completely as possible.

Courses this student has taken with you (course title and year):

Considering all seniors graduating in 2009 who have taken courses with you, please rank this student.

(Circle one) Upper 1% Upper 5% Upper 10% Upper 25%

and/or rank no. _____ of _____ graduating students.

What is the most positive aspect of this student's scholastic work?

What is the weakest aspect of this student's scholastic work?

Is this student likely to finish a 4 or 5 year college program?

Is this student likely to pursue graduate study?

TEACHER EVALUATION FORM
BILL GIBBS ENDOWMENT FUND/RA REARWIN SCHOLARSHIP FUND

Please circle which adjective most accurately describes this student in relation to all students you have taught.

OUTSTANDING EXCELLENT ABOVE AVERAGE AVERAGE

If you have any knowledge of the student's career interests, please explain.

If you have knowledge of any of the student's extracurricular activities or challenges the student has overcome, please describe.

Other comments (optional)

Teacher's signature

Date