



# Fairfield PTA Council

501 Kings Highway East, Fairfield, CT 06825  
[www.FairfieldPTAC.org](http://www.FairfieldPTAC.org)



## Brian Fagan Grant

<p><b>Purpose:</b></p>	<p>This grant is intended to recognize and reward outstanding teachers who demonstrate leadership and are currently enrolled in a program leading to an administrative certification.</p>
<p><b>Benefits:</b></p>	<p>Each recipient will be honored by the Fairfield PTA Council in a public ceremony and will receive a monetary grant to defray the cost of educational expenses.</p>
<p><b>Eligibility:</b></p>	<p>Candidates must meet the following qualifications:</p> <ul style="list-style-type: none"> <li>➤ certified teacher employed by the Fairfield Public Schools;</li> <li>➤ employed by the Fairfield Public Schools for the year in which the award is presented;</li> <li>➤ demonstrate current matriculation in a graduate program of study in educational administration.</li> </ul>
<p><b>Requirements:</b></p>	<p>There are three sections to this application. Candidates must submit the following to be considered for the Brian Fagan Grant:</p> <ol style="list-style-type: none"> <li>1) Application - see attached document</li> <li>2) Statement of purpose - In a short essay, no more than 300 words, succinctly describe what you see as the most pressing issue facing public education today. Also, explain why you are working toward a degree or certification in educational administration.</li> <li>3) Letter of recommendation from a current Fairfield Public School Administrator</li> </ol>
<p><b>Application Deadline:</b></p>	<p>The completed application must be received by <b>February 3, 2011</b>          Mail the completed application to:</p> <p style="text-align: center;"><b>Elaine T. Davis</b>  <b>PTA Council Awards Chair</b>  <b>206 Farmington Avenue</b>  <b>Fairfield, CT 06825</b></p>



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## Brian Fagan Grant Application

Title	Last name	First name	Middle Initial
Street address		Town	Zip Code
School currently employed at			Home Phone

### Please list your graduate school information:

College/Academic Program	_____
Start Year/Expected Completion	_____
Degree/Certification sought	_____

### Please list your job experience:

Position	Employer	Years

### Please list your education:

College	Field of Study	Degree sought or obtained	Years

### List other experiences/positions which contribute to your ability as an educator and demonstrate your potential for leadership (i.e., community volunteer, leadership positions, professional memberships)

Position	Organization	Years

If necessary, please attach a separate page with additional information.

### Applicant Authorization

To the best of my knowledge, all the information presented is true and accurate.

Signature	Date
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