



School Administrators  
Foundation for Education

# James V. and Dorothy B. Moon Scholarship Application



Name \_\_\_\_\_ County of Residence \_\_\_\_\_

School District \_\_\_\_\_

Title at School District \_\_\_\_\_

Work Address \_\_\_\_\_

Work E-mail \_\_\_\_\_

Telephone (Work) \_\_\_\_\_ (Home) \_\_\_\_\_

Home Address \_\_\_\_\_

College or University Attending \_\_\_\_\_

At the discretion of the Board of Trustees, persons who fail to comply with the terms of this scholarship may be required to refund part or all of the funds expended on their behalf. Scholarship recipients shall be required to agree in writing to this stipulation at the time of application, prior to its consideration.

By signing below, I agree to comply with the terms of the scholarship as noted within the Guidelines.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

## Scholarship Requirements

**Practicum Question:** Please respond to the following question. (Maximum Length—3 pages)

What do you perceive your role to be in the following areas:

- Educational Leader
- Community Leader
- Political Advocate for Public Schools

**The applicant must submit the following items along with this application form (please keep in order):**

- ☐ **Section I**—Response to practicum question listed above
- ☐ **Section II**—Three letters of reference, specific to the matter of the scholarship
- ☐ **Section III**—A statement by the applicant indicating a commitment to the superintendency
- ☐ **Section IV**—A statement by the applicant concerning involvement with professional development programs
- ☐ **Section V**—Verification by the college or university of the applicant's official status as a degree candidate

*over please...*

- ☐ **Section VI**—A full set of university transcripts (must be submitted along with the application; please do not send separately)
- ☐ **Section VII**—Proof of employment as a practicing administrator in Illinois (letter on school district letterhead signed by an official at the school district.)
- ☐ **Award Acknowledgment Form**

**PLEASE  
NOTE:**

It is the applicant's responsibility to provide all requested items along with the completed application.

**Incomplete applications will not be accepted and/or considered.**

Send a PDF copy of the completed application package (single-sided) to Jodi Gillespie via email at [jgillespie@iasaedu.org](mailto:jgillespie@iasaedu.org) by 10 a.m., Friday, January 16, 2026.

Questions can be directed to Jodi Gillespie at 217-753-2213 or [jgillespie@iasaedu.org](mailto:jgillespie@iasaedu.org).

**Application package email deadline:  
10 a.m. Friday  
January 16, 2026**



## Award Acknowledgement Form

I, \_\_\_\_\_, hereby acknowledge and understand the selection criteria and award expectations as set forth in the application. If selected, I acknowledge that I am expected to be of high integrity, moral character and uphold the highest standards of professionalism.

I further acknowledge and have read the Illinois Association of School Administrators' Code of Ethics as follows and hereby agree to be held to the professional standards as set forth within.

***The IASA Member shall:***

- ☐ exercise allegiance to the United States of America and the State of Illinois
- ☐ afford leadership to the educational community
- ☐ demonstrate effective and efficient administration and management of schools
- ☐ honor the public trust
- ☐ be of high moral character in all matters public and private
- ☐ practice the highest standards of responsibility
- ☐ respect and protect the dignity and worth of all people
- ☐ provide the best possible educational opportunities and experiences for all students
- ☐ contribute to the achievement of all students at their maximum potential
- ☐ foster communication with the public
- ☐ increase community involvement in the schools
- ☐ recognize parents as partners in a child's education
- ☐ support the recruitment and retention of quality teaching and support personnel
- ☐ add to the body of specialized knowledge of school administration
- ☐ work within school board policy, local, state and federal laws
- ☐ advise the board of education on educational matters
- ☐ administer board policy and decisions effectively

I understand and agree that by applying and if selected that the Board of Directors of the Illinois Association of School Administrators reserves and maintains the right to rescind any award for misrepresentation, fraud, sufficient evidence of malfeasance and/or violation of the Illinois Association of School Administrators' Code of Ethics or other applicable code of ethics to which may apply and/or felony conviction relating to or arising out of or in connection with your service as an educator. As an award winner representing Superintendents statewide we want to make certain the highest standards of professionalism are met.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date