



State of Wisconsin Higher Educational Aids Board

Tony Evers
Governor

P.O. Box 7885
Madison, WI 53707-7885
E-Mail: HEABmail@wi.gov

Telephone: (608) 267-2206
Fax: (608) 267-2808
Web Page: <http://heab.wi.gov>

Student Request for Consideration

Wisconsin Technical Excellence Scholarship (TES)

Updated February 2019

Students seeking to be nominated by their high school for the Wisconsin Technical Excellence Scholarship (TES) can complete this form and provide it to their school to request consideration for the scholarship. **This form is not an application for the scholarship; it may be used by a student to request consideration for the scholarship.**

Completed forms should NOT be sent to HEAB, but to a student's school counselor or other contact as named by the school or school district. Nominations are made by school districts to HEAB.

Use of this form is voluntary for students and for school districts. School districts may want to create policies pertaining to use of this form including submission deadlines and designation of where completed forms are to be sent. HEAB does not need to approve these policies. **Students need to check with their school to know more.**

An eligible candidate for a TES scholarship is a high school senior meeting at least one of the following criteria.

1. Be a CTE Concentrator, which is a high school student who has completed at least three (3) high school CTE courses (career and technical education courses) in program area(s) leading to a degree or diploma in the student's chosen pathway. A student may be enrolled in (rather than have completed) the third course at the time of their nomination for TES.
2. Participated in a Youth Apprenticeship Program under the supervision of the Wisconsin Department of Workforce Development (DWD) (see https://dwd.wisconsin.gov/youthapprenticeship/program_info.htm)
3. Participated in a Technical High School Diploma program as certified by the Wisconsin Department of Public Instruction (DPI) (see http://cte.dpi.wi.gov/cte_tehsd)
4. Participated in a Career and Technical Training pathway as defined by the Wisconsin Department of Public Instruction (DPI) (see http://cte.dpi.wi.gov/cte_clustersandpaths)
5. Participated in a Skills Standards Program offered by the Wisconsin Department of Public Instruction (DPI) (see http://cte.dpi.wi.gov/cte_cteskills)
6. Completed (or be on track to complete) an industry-recognized certification program approved under Wis. Stats. 115.367 (2). (This requirement is created under 2013 Wisconsin Act 59).
7. Participated in a Career and Technical Student Organization (CTSO) in Wisconsin: DECA, FBLA, FCCLA, FFA, HOSA, or SkillsUSA (see http://cte.dpi.wi.gov/cte_ctso)
8. Completed a technical training program for high school students if the program is offered by a UW System school, a Wisconsin Technical College System school, a tribal college in Wisconsin, or a private nonprofit college or university located in Wisconsin. Examples include but are not limited to:

- Medical College of Wisconsin Summer Enrichment Programs
- UW-Madison's Summer Science Institute at WIScience
- Marquette University's K-12 Engineering Academies
- MSOE summer programs for K-12 students

The program must be offered BY a Wisconsin colleges or university; programs held at these campuses but offered by others are not eligible. (Such programs are usually of shorter duration.)

Ranking of eligible candidates in each high school is to be made according to a ranking system. A student must meet one of the eight eligibility criteria listed above to be eligible. HEAB recommends a ranking system to schools but they may elect to create their own.

STUDENT STATEMENT OF ELIGIBILITY

I, _____ (student name), believe that I meet the eligibility requirements for the Wisconsin Technical Excellence Scholarship (TES) and I request consideration for nomination to the scholarship. I have met the following eligibility criteria as listed above: (circle one or more)

1 2 3 4 5 6 7 8

Additional details about my eligibility: (Please provide a summary of your activity, including dates, the names and locations of programs or activities that make you eligible, as well as contact information for the activity, including names and telephone numbers or email addresses of people who can vouch for your involvement.)

Additional information may be attached

Student Name (printed and signed)

Telephone / Email

Date

THIS FORM GOES TO YOUR SCHOOL, not to HEAB