2013-2014 SCHOLARSHIP APPLICATION ALABAMA ASSOCIATION OF SCHOOL OFFICE PERSONNEL

NAME			
(Last Name)	(First Name)	(Middle Initi	al)
ADDRESS(Street)) (State)	(ZIP + 4)
AASOP DISTRICT NUMBER			
TELEPHONE - DAY ()			
*FATHER'S NAME	OCCUPATION		
*FATHER'S PLACE OF EMPLOYMENT _		ANNUAL INCOM	E \$
*MOTHER'S NAME		 OCCUPATION	
*MOTHER'S PLACE OF EMPLOYMENT_		ANNUAL INCOM	E \$
TOTAL HOUSEHOLD ANNUAL INCOME	3		\$
NUMBER OF ALL PEOPLE IN HOUSEHC)LD		
ARE ANY OTHER FAMILY MEMBERS A	TTENDING COLLEGE?	IF YES, HO	W MANY?
ARE YOU, YOUR SPOUSE, MOTHER OR ASSOCIATION OF SCHOOL OFFICE PER			ABAMA
APPLICANT MOTHER	FATHER	_ SPOUSE	
NAME OF AASOP MEMBER			
NAME OF BOARD OF EDUCATION EMP	LOYING AASOP MEME	SER	
NAME OF SCHOOL EMPLOYING AASOI	P MEMBER		
WORK PHONE NUMBER OF AASOP ME	MBER ()	HOUSEHOLD INCOME	ANNUAL \$
NAME OF HIGH SCHOOL ATTENDING _			
GRADE POINT AVERAGE (4 POINT SCA	LE) Convert to 4-point average, if nec	ACT OR SAT SCOR	E
NAME OF COLLEGE/SCHOOL YOU PLA	N TO ATTEND		

*GUARDIAN NAME AND PLACE OF EMPLOYMENT IF APPLICABLE

ADDRESS OF COLLEGE/SCHOOL							
CURRICULUM YOU PLAN TO PURSUE							
LIST OTHER GRANTS OR SCHOLARSHIPS RECEIVED							
LIST OTHER GRANTS OR SCHOLARSHIPS YOU MIGHT RECEIVE							
WORK EXPERIENCE (BEGIN WITH PRESENT OR MOST RECENT EMPLOYER)							
	EMPLOYER	ADDRESS	DATES OF <u>EMPLOYMENT</u>	ANNUAL <u>WAGES EARNED</u>			
LIST HONORS RECEIVED AND EXTRACURRICULAR ACTIVITIES							
THREE REFERENCES ARE REQUIRED. ENCLOSE A LETTER FROM EACH REFERENCE. ONE SHOULD BE FROM SOMEONE IN YOUR SCHOOL - PRINCIPAL, TEACHER, COUNSELOR; THE OTHER TWO MAY BE FROM YOUR PASTOR, CHURCH LEADER, EMPLOYER OR SOMEONE IN YOUR COMMUNITY. LIST THEIR NAMES, ADDRESSES AND OCCUPATIONS BELOW: NAME ADDRESS							
1.							
2.							
3.							

ATTACH ADDITIONAL PAGES IF NEEDED. THIS FORM IS FOR THE 2013-2014 SCHOOL YEAR AND IS DUE BY MARCH 31, 2014.

TASKS TO BE COMPLETED BEFORE APPLICATION CAN BE PROCESSED:

- 1. PLAN TO ENROLL IN THE COLLEGE OF BUSINESS OR K-12 EDUCATION.
- 2. COMPLETE <u>ALL</u> ITEMS ON THE APPLICATION. IF UNKNOWN OR NOT APPLICABLE, INDICATE UNKNOWN OR N/A.
- 3. ATTACH A RECENT PHOTOGRAPH. (OPTIONAL)
- 4. ATTACH A PERSONAL LETTER STATING YOUR FINANCIAL NEED FOR THE SCHOLARSHIP.
- 5. ATTACH A TRANSCRIPT OF YOUR SCHOOL GRADES THROUGH THE FIRST SEMESTER OF THE CURRENT SCHOOL YEAR, WITH THE GRADE POINT AVERAGE LISTED. NOT NECESSARY FOR AASOP MEMBERS APPLYING FOR SCHOLARSHIP WHO ARE NOT CURRENTLY ENROLLED IN COLLEGE.
- 6. ATTACH ONE LETTER FROM EACH OF THE THREE REFERENCES LISTED ON YOUR APPLICATION.

APPLICATIONS WILL NOT BE CONSIDERED UNLESS ALL REQUIRED INFORMATION IS PROVIDED. (FILL IN <u>EVERY</u> BLANK) DEADLINE: MUST BE RECEIVED BY MARCH 31, 2014

ALABAMA ASSOCIATION OF SCHOOL OFFICE PERSONNELL SCHOLARSHIP COMMITTEE 2013-2014

TO:Superintendents, Counselors, and B.E. InstructorsFROM:Yolanda Grace, Scholarship Committee Chairperson

SUBJECT: ALABAMA ASSOCATION OF SCHOOL OFFICE PERSONNEL (AASOP) SCHOLARSHIP (HIGH SCHOOL AND AASOP MEMBERS)

This year, the Alabama Association of School Office Personnel will award up to four (4) \$1,000.00 scholarships to students pursuing a degree from the college of business of K-12 education. Listed below are specific rules and regulations concerning these scholarships. Each applicant should furnish **ALL** requested information. This information will be kept confidential. The recipients will be notified no later than May 2, 2014. The completed application must be received by <u>March 31, 2014</u>.

Please Mail to:	Yolanda Grace	Yolanda Grace		
	3165 Reeves Street	334-794-1436		
	Dothan, AL 36303	yograce@dothan.k12.al.us		

RULES AND REGULATIONS

- 1. Scholarships will be given to high school graduates (or graduating seniors) who desire to pursue a degree from the college of business or a degree in K-12 education at an accredited Alabama school, college or university. The student's parent does not have to be a AASOP member to apply.
- 2. A scholarship may be given to an AASOP member who is pursuing a degree from the college of business or K-12 education. If no qualifying applications are received from members, then this scholarship may be awarded to eligible applications. Of the scholarships awarded, the Georgia P Gallis scholarship is to be designated for the child of an AASOP member, If no applications are received from children of AASOP members, the scholarship will be awarded to an eligible applicant.
- 3. The scholarships will be awarded on the basis of scholastic record and financial need.
- 4. A previous recipient may re-apply for a scholarship.
- 5. Scholarship money will be paid directly to the school upon certification of enrollment. This certification must be received prior to November 1 in the year awarded.

TASKS TO BE COMPLETED BEFORE APPLICATION CAN BE PROCESSED.

- 1. Plan to enroll in the college of business or K-12 education.
- 2. Complete all items on the application.
- 3. Attach a recent photograph (optional).
- 4. Attach a personal letter stating your financial need for the scholarship.
- 5. Attach a transcript of your school grades through the first semester of the current school year, with the grade point average listed. This is not necessary for AASOP members applying for the scholarship of they are not currently enrolled in college.
- 6. Attach one letter from each of the three references listed on your applications.

APPLICATIONS WILL NOT BE CONSIDERED UNLESS ALL INFORMATION IS ENCLOSED. APPLICATION MUST BE RECEIVED BY MARCH 31, 2014.