Atchison National Education Association Scholarship Application Academic Year 2019-2020

Please answer all the questions to the best of your ability. Please print clearly.

| Legal Name: | | | |
|---|----------------------|-----------------|--------------------------|
| First | Middle Initial | | Last |
| Birth Date:/ Pho | one () | | |
| Permanent Address: | | | |
| Number | & Street | City | State/Zip |
| Are you a citizen of the U.S.? | Yes | No | |
| Name of High School from whi | ch you graduated: | | |
| Date of Graduation:/_ | / H | ligh School Cu | mulative GPA: |
| College Cumulative GPA (if app | ol.): | | |
| Semester entering college: Fal | | | |
| Area of academic interest: | | | |
| Have you attended college before | ore? Yes | No | |
| Scholastic Achievements/Lead | lership Activities/0 | Office(s) Held/ | Community Service: |
| | | | |
| | | | |
| | | | |
| | | | |
| Your current employer: | | | |
| CERTIFICATION: I certify that t and true. | he information, wh | ich I have prov | ided herein, is complete |
| Applicant's Signature: | | | Date: |
| ANEA Member's Signature: _ | | | |

After completing this application and the reference information on page two, attach copies of 1) this two-page form, 2) your transcripts from high school/colleges, 3) your essay and 4) a letter of recommendation from an instructor/administrator at your current education institution, and mail or bring packet to ANEA Scholarship Committee, Joann Shugart, Atchison High School, 1500 W. Riley St. Atchison, KS 66002

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Reference Information

| Scholarship Applicant's Name: | | | | | | | | |
|--|----------|---------|---------|----------|---------|------|--|--|
| To be completed by a high school official (counseniors, college instructor/advisor for college s | | | strator | for hig | h schoo | ol | | |
| Your input is needed to enable the Scholarship request. Scholarships are awarded based on o | - | | | a decisi | on on t | his | | |
| Rated Scale | 1-5 | (5 bein | g the h | ighest) | | | | |
| Please circle one in each category. | | | | | | | | |
| Scholastic achievements | 1 | 2 | 3 | 4 | 5 | N/A | | |
| Attendance | 1 | 2 | 3 | 4 | 5 | N/A | | |
| Academic performance compared to tests | 1 | 2 | 3 | 4 | 5 | N/A | | |
| Leadership in school/community | 1 | 2 | 3 | 4 | 5 | N/A | | |
| Participation in class | 1 | 2 | 3 | 4 | 5 | N/A | | |
| | | | | | | | | |
| Name of high school or college | | | | | | | | |
| Printed name | | | | Phone # | | | | |
| Signature | Title | | | | | | | |
| Date | | | | | | | | |
| +++++++++++++++++++++++++++++++++++++++ | +++++ | ++++ | +++++ | +++++ | +++++ | ++++ | | |
| Atchison National Education Scholarship Com | mittee U | se Only | , | | | | | |
| Recommended for scholarship: Yes | No | | | | | | | |
| ANEA Scholarship Committee Member | | | | | | | | |
| ANEA Scholarship Committee Member | | | | | | | | |
| ANFA Scholarshin Committee Member | | | | | | | | |

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There is no need to return this page. It is for your information only.

Scholarship Criteria

- 1. Parent must be a current or retired member of Atchison ANEA.
- 2. Open application, but preference to those planning on going into the education field.
- 3. Applicant must have a 3.0 or better GPA.
- 4. Essay of 500 to 1000 words on applicant's goals. Essay must be typed, double spaced.
- 5. Recipient may reapply yearly.

Deadline for filing is April 30, 2019. Send completed application form (2 pages), proof of grade point, transcript, essay, and recommendation letter from teacher/professor/administrator (in addition to information on page two) to:

Joann Shugart Atchison High School 1500 W. Riley St. Atchison, KS 66002

The Association will award two (2) scholarships, each in the amount of \$250.00, once enrollment is proven. If only one application is received, the scholarship amount will be \$500.00.