# Announcing

California Association of Educational Office Professionals

## STUDENT SCHOLARSHIP OPPORTUNITY



Provided to assist business education students who wish to continue with higher education and pursue a career in business administration or education.

The 2014-2015 scholarships are valued at \$1,000 each and more than one scholarship may be awarded.

### Please read carefully and follow the accompanying GUIDELINES

Application and accompanying materials MUST be postmarked by January 9, 2015 and mailed to:

### **Debbie Blodgett**

CAEOP Scholarship/Awards Chairman
Hemet Unified School District
Professional Development
1791 West Acacia Avenue
Hemet, CA 92545
PH: 951-765-5100 x 3601 \* FAX: 951-765-6421
dblodgett@hemetusd.org

Visit our website for more information www.caeop.org



## California Association of Educational Office Professionals

## STUDENT SCHOLARSHIP 2014-15 APPLICATION & GUIDELINES

The CAEOP Student Scholarship is provided to assist business education students who wish to continue higher education and pursue a career in business administration or education. The 2014-2015 scholarship is valued at \$1,000. More than one scholarship may be awarded. This scholarship is a "tuition-only" scholarship.

#### **CRITERIA**

- » Need for financial assistance,
- » Scholastic achievement,
- » Initiative,
- » Extracurricular Activities, and
- » Quality and completeness of application materials

#### **TO QUALIFY**

- ▶ Applicant must be a graduating high school student who has made application to continue his/her education OR the applicant may currently be pursuing such a course of study in an institution of higher education.
- ▶ Applicant must have maintained a grade point average of 2.0 or better in high school.
- ▶ Applicant must have applied for admission to a post-high school accredited institution and plan to enter following the granting of the scholarship, or already be enrolled in an accredited college or university.
- ▶ Applicant must be a resident of the State of California.
- ► Applicant must intend to continue his/her education in the field of business administration or education.
- ► Applicant shall be responsible for the completion and return of all required support materials to the CAEOP Scholarship/Awards Chairman before the deadline date.

#### APPLICATION

An application will be considered complete when the following items have been received by the CAEOP Scholarship/Awards Chairman:

- Completed application and biographical information forms included on pages 4 and 5.
- ▶ **Official** copy of high school transcript (or university/college transcript for higher education applicants) in a sealed envelope. High school transcript must indicate class rank. College transcript must show cumulative GPA.
- ► Completed one-page essay on "Why I am Choosing a Career in Business or Education."
- ▶ Submit THREE letters of recommendation: (a) from a principal, counselor or other school administrator describing the candidate's activities, leadership record, character, personality, initiative, and home background; (b) from a language arts or math teacher; and, (c) from someone other than a CAEOP member or other than a family member.

#### SELECTION CRITERIA/PROCEDURE

Recommendations	10%
Activities/School/Extracurricular	10%
Financial Need	30%
One-Page Essay	20%
Scholastic Record (official transcript)	30%

The CAEOP Scholarship/Awards Chairman will select a panel of judges to review applications and select the winning application(s).

All applicants will be notified of the status of their application by the CAEOP Scholarship/ Awards Chairman.

Students selected to receive a 2014-2015 CAEOP Student Scholarship will be invited to attend the Awards Luncheon as part of the CAEOP Annual Conference held in early March. The student and two parents will be the guests of CAEOP at the luncheon where they will receive recognition for this special honor.

Any questions relative to the scholarship application or information required should be directed to the CAEOP Scholarship/Awards Chairman. The CAEOP Scholarship/Awards Committee will notify all candidates by February 27, 2015 as to its selection of scholarship recipients.

#### AWARD DISBURSEMENT

To receive the scholarship funds, the scholarship recipient should send verification of enrollment at an accredited college or university to the CAEOP Scholarship/Awards Chairman. Upon receipt of the enrollment verification, the CAEOP Scholarship/Awards Chairman will request payment. The check, in the amount of \$1,000, will be forwarded to the appropriate office of said educational institution for "tuition only" within 30 days.

#### **DELAY OF SCHOLARSHIP PAYMENT**

If a scholarship recipient is unable to attend a post-high school institution during the term following the granting of the scholarship, and so notifies in writing the CAEOP Scholarship/ Awards Chairman of the California Association of Educational Office Professionals, the award may be held over for one school year. This request letter must be received by the CAEOP Scholarship/Awards Chairman no later than September 1<sup>st</sup>. Following receipt of the written request, the CAEOP Scholarship/Awards Chairman will confirm postponement of the scholarship award until the following year. Prior to August 1st of the following year, the scholarship recipient must request activation of their prior year scholarship by sending a letter to the CAEOP Scholarship/Awards Chairman along with proof of enrollment at a posthigh school accredited institution.

CONTACT PERSON: Debbie Blodgett, CAEOP Scholarship/Awards Chairman

Hemet Unified School District Professional Development 1791 West Acacia Avenue \* Hemet, CA 92545 (951) 765-5100 x 3601 \* (951) 765-6421 (FAX)

Email: dbodgett@hemetusd.org www.caeop.org



## California Association of Educational Office Professionals 2014-2015 STUDENT SCHOLARSHIP APPLICATION

Please read the application guidelines prior to completing the application information requested below. For additional space, use an  $8\ 1/2\ x\ 11$  sheet of paper and attach. Type or print clearly.

1.	Name of Applicant		Med dia		
2.	Home Address	FIRST	Middle	Last	
3.	Telephone ()	Street 	City Other Phone No. (Cell):	Zip	
4.	Name and address of hig	jh school:			
			Date of Gra	duation:	
5.	Are you currently enrolled in college?   Yes   No If yes, name and address of college:				
6. -	Are you a high school se If yes, list in order of pre have formally applied for Name of Educational Institu	eference three coll radmission:	□] No eges, universities, or business Address	s schools to which you  Accepted?	
	Name of Educational Instite		-tuur C33		
If m 7.		ar activities, includ	attach another sheet(s). ling athletics, music, etc., and		
8.	Academic awards or hon	ors:			
9.	, ,	•	s, including all offices held:		
10.	Have you worked part-ti Where Employed	me during your so	chool career? If so, list:  Primary Responsibility	Dates	
11.	scholarship committee.		information you feel would be of interest to the		
of p	rtify the above is true and aying expenses for my c	d correct. I will us ollege education a	se any funds received from CA and I will notify CAEOP imme education this coming year.	AEOP only for the purpose	
	Signature of Applicant		Date:		



# California Association of Educational Office Professionals 2014-15 STUDENT SCHOLARSHIP APPLICATION

## **BIOGRAPHICAL INFORMATION SHEET**

1.	Name of Applicant					
	First	Middle		Last		
2.	Father's Name Mother's Name					
3.	Father's Address					
4.	Mother's Address					
5.	Father's Occupation	Mother's Occupation				
6.	Number of parents' dependents (not including you) and their ages:					
7.	What is your chosen major?					
8.	What is your career objective?					
9.	Will your parents assist you financially in continuing your education?					
	Will you have any other assistance (	(social security benefits, e	etc.)?	☐ Yes ☐ No		
10.	Have you received any other scholarships?   Yes   No					
	If yes, list name and amount:					
11.	. How much anticipated annual assistance do you feel you will need to continue your education after graduating from high school?					
12.	Please check the range of your fami Below \$25,000		-\$69,999	\$70,000 or more		
13.	List any other family income:					
14.	List any other family/financial/persona	al adversity circumstance	s which shou	uld be considered:		
]	I certify the above is true and correct					
			Date: _			

Signature of Applicant