

KANSAS FCCLA PEER EDUCATION SCHOLARSHIP APPLICATION DIRECTIONS

Please email a copy of your completed Scholarship Application to: Pam Lamb at: plamb@ksde.org by February 19

ELIGIBILITY REQUIREMENTS:

The scholarship candidate:

- has been an active FCCLA member for three semesters
- has completed at least <u>two semesters</u> of Family and Consumer Sciences at the high school level
- · has participated in a minimum of two school and community activities
- has a 3.0 GPA on a 4.0 scale
- is planning for a career of their choice
- has actively participated in national programs other than STAR events or Power of One

PROVISIONS FOR AWARDING SCHOLARSHIPS:

- The scholarship is available to graduating FCCLA members.
- Scholarship recipient must attend a two or four-year college or university in Kansas.
- Two scholarships of \$200 each may be awarded each year.
- Applications must be mail to the Kansas FCCLA State Office
- Scholarships will be paid directly to the college or university after the Kansas FCCLA state office has received verification of enrollment from the scholarship recipient
- Recipients will be announced at the annual State Leadership Conference.

HIGH SCHOOL SENIORS should complete the entire application form and return it with a high school transcript with the counselor's signature. On a separate paper, please list your FACS courses taken in high school and the length of time in which you took them. (One or two semesters) Scan & Email directly to Pam Lamb plamb@ksde.org



KANSAS FCCLA PEER EDUCATION SCHOLARSHIP APPLICATION FORM

AND PLEASE TYPE EVERYTHING IN AN ARIAL 12-POINT FONT.

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I.	Date of Application:					
	Name of Applicant:					
	Applicant Address:					
	Parent's Names:					
	Parent's Address:					
	Total Semesters of FAC					
	Years as an FCCLA Member:					
Type of Chapter: (Occupational of Comprehensive)						
II.	High School(s) Attended	d:				
	High School(s) Address	:				
	Dates Attended:					
	Graduation Date:					
III.	Summarize your FCCL	A Activities and specifically describe the national program activities to be				
	considered for this scholarship.					
IV.	Summarize your school	activities other than FCCLA.				
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V.	Summarize your Family and Consumer Sciences activities and projects.
VI.	Summarize your community activities.
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VII.	List high school scholastic honors. (Honorary Societies, etc.)
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VIII.	List your work experience. Include your employers, type of work, and your dates of employment.
IV.	
IX.	What college or university in
	Kansas do you plan to attend?
IX. X.	
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XI.	Explain the following:								
	Why do you plan to continue your education?								
	What will be your major area of study?								
	What are your plans upon completing your education?								
	what are your plans upon completing your education.								
	How do your future plans include FCCLA?								
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XII.	Describe the leadership role you assume in your family.								
XIII.	Include the following with your application form:								
	Statement of recommendation from your Chapter Advisor or Scho	ol Administrator.							
	High School Transcript (must have a 3.0 GPA or above) with cour	selor's signature.							
XIV.	Signature of Applicant	Date:							
AIV.	Signature of Applicant	Date.							

Please email a copy of your completed Scholarship Application,

Transcript, and Statement of Recommendation to:

Pam Lamb at: plamb@ksde.org

SCHOLARSHIP APPLICATION SCORE CARD TO BE COMPLETED BY THE EVALUATION COMMITTEE

Name:	
Address:	

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CRITERIA	5	4	3	2	1	COMMENTS
FACS/OFACS classes						
FCCLA Activities - specifically national						
programs						
programs						
School Activities						
School Activities						
FACS/OFACS Activities						
FACS/OFACS Activities						
Community Activities						
Honors						
Tionors						
Essay						
Reasons for Continuing Education						
Family Leadership Role						
Taning Leadership Role						
FCCLA Advisor/Administrator						
Recommendation						
Transcript reflecting GPA						
Major in College						
Grammar/Spelling/Neatness						

Comments: