PLEASE NOTE: The completed application with enclosures must be submitted by email or postmarked by Friday, **January 19, 2018.**



Kansas State Department of Education Association of Educational Office Professionals <u>Margaret Van Horn Scholarship</u>

Funds for the Margaret Van Horn Scholarship have been allocated by members of the Kansas State Department of Education Association of Educational Office Professionals (KSDE AEOP). The scholarship program is open to current Kansas High School, College, and/or Technical School students. Applicant must intend to continue his/her education in an education or business-related program. Applicant must be enrolled in a minimum of nine semester hours (at least half-time). Enrollment must be in an accredited post-secondary educational facility within the state of Kansas.

AMOUNT OF SCHOLARSHIP:

A scholarship is awarded annually. The amount is based on gifts and funds raised by the association. The amount for this year is \$300.00. Use of the scholarship award is intended to offset the cost of tuition, books, class fees, supplies, or other scholastic expenses.

APPLICATIONS:

Selection of the recipient will be based on the scholarship application, student initiative, character, and/or other factors supporting his/her candidacy. An application (electronic or hard copy) can be obtained from any member of the Scholarship Committee or your school counselor. The scholarship will be awarded to the applicant receiving the highest rating from a panel of evaluators. Applications must be complete, signed, and submitted by email in pdf format or postmarked by Friday, **January 19, 2018**, to be accepted.

INSTRUCTIONS TO THE APPLICANT:

- 1. Application is to be completed online or printed and typed for submission (handwritten applications will be disqualified).
- 2. Submit current "official" high school/college/technical school transcript(s) (with GPA).
- 3. Submit a one page typed essay, "Why I am Choosing an Education or Business-Related Career or Vocation."
- 4. Application must be signed.
- 5. The completed application with enclosures must be submitted by email or postmarked by **Friday**, **January 19, 2018**.
- 6. Failure to submit all requested information and to follow all guidelines will result in disqualification.

AWARD DISBURSEMENT

- 1. The scholarship recipient will be required to notify KSDE AEOP in writing once enrolled in a Kansas accredited post-secondary educational facility. In order to receive the scholarship, proof of enrollment must be submitted, including student ID #, to the address provided in the scholarship award letter.
- 2. When notification is received, KSDE AEOP will send a check in the amount of \$300 to the recipient.
- 3. The approved monies will be valid only for the academic year following the awarding of the scholarship (fall, winter, spring and summer quarter/semester).

MAIL SUBMISSIONS TO:

Kelli Byrne Kansas State Department of Education 900 S.W. Jackson Street, Suite 653 Topeka, KS 66612

FOR EMAIL SUBMISSIONS OR QUESTIONS:

| Kelli Byrne | Ashley Christiansen | Michelle Irvine | |
|------------------------|-------------------------------|-------------------------|--|
| <u>kbyrne@ksde.org</u> | <u>achristiansen@ksde.org</u> | <u>mirvine@ksde.org</u> | |
| 785-296-3784 | 785-298-7436 | 785-296-2276 | |

Application must be emailed or postmarked by Friday January 19, 2018 Approved 09/27/2017



Kansas State Department of Education Association of Educational Office Professionals

Application for Margaret Van Horn Scholarship

| | Date: _ | Applica | ant Signature: | | | |
|----|---|--|---|---|--|--|
| 1. | Applicant Name: | | | | | |
| 2. | Applicant Home Address: | | | | | |
| | | (Street) | (City) Cell Phone: | (Zip) | | |
| | Applicant Email: | | | | | |
| 3. | Name of parent or legal guardian (if applicable): | | | | | |
| | Audi ess | (Street) | (City) | (Zip) | | |
| | Home Phone: | | | | | |
| 4. | Name and address of the Kansas high school, technical school, and/or college currently attending: | | | | | |
| 5. | List your most significant non-school activities, clubs, associations, volunteer activities, and any offices held: | | | | | |
| 6. | List your most significant school extracurricular activities, including athletics, music, academic clubs, e and any offices held: | | | | | |
| 0. | | ant school extracurricular | activities, including athletics, m | usic, academic clubs, | | |
| - | and any offices held: | | e activities, including athletics, m describe these awards/honors) | | | |
| 7. | and any offices held: Honors, awards, and o | ther recognitions (briefly | | : | | |
| 7. | and any offices held: Honors, awards, and o | ther recognitions (briefly | describe these awards/honors) his work is related to your caree | : | | |
| 7. | and any offices held: Honors, awards, and o List current employme Where Employed | ther recognitions (briefly ent positions. Indicate if t | describe these awards/honors) his work is related to your caree | r goal: Related to Career Goal | | |
| 7. | and any offices held: Honors, awards, and o List current employme Where Employed | ther recognitions (briefly ent positions. Indicate if t Primary Responsibilities | describe these awards/honors) his work is related to your caree | r goal: Related to Career Goal | | |
| 7. | and any offices held: Honors, awards, and o List current employme Where Employed List scholarships appli | ther recognitions (briefly ent positions. Indicate if t Primary Responsibilities | describe these awards/honors) his work is related to your caree Date(s) | r goal: Related to Career Goal Yes/No | | |

- 11. On a separate sheet, please prepare a typed one page essay, "Why I am Choosing an Education or Business-Related Career or Vocation."
- 12. Briefly list any other pertinent information you wish the evaluators to know about you.

Do not write below this line

AEOP Evaluators:

| Name | Read |
|------|------|
| | |
| | |
| | |
| | |