

**ALABAMA ASSOCIATION OF SCHOOL OFFICE PERSONNEL
SCHOLARSHIP COMMITTEE
2016 – 2017**

TO: Superintendents, Counselors, and B.E. Instructors
FROM: Amy Messer, Scholarship Committee Chairperson
SUBJECT: ALABAMA ASSOCIATION 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 or 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, 2017. The completed application must be received by March 1, 2017.

Please mail completed application to: Amy Messer
2410 Society Hill Road
Opelika, AL 36804

Contact Information: Amy Messer, phone: 334-705-4154 email: messer.amy@lee.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 an AASOP member to apply.
2. A scholarship may be 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 applicants. 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 1st in the year awarded.

TASKS TO BE COMPLETED BEFORE APPLICATION CAN BE PROCESSED:

1. Plan to enroll in 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 if 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 1, 2017.**

2016 – 2017
SCHOLARSHIP APPLICATION
ALABAMA ASSOCIATION OF SCHOOL OFFICE PERSONNEL

NAME: _____
(LAST NAME) (FIRST NAME) (MIDDLE INITIAL)

ADDRESS: _____
(STREET) (CITY) (STATE) (ZIP+4)

AASOP DISTRICT NUMBER: _____ COUNTY: _____

TELEPHONE - DAY: (____) ____ - ____ TELEPHONE - EVENING: (____) ____ - ____

GUARDIAN'S NAME: _____ OCCUPATION: _____

GUARDIAN'S PLACE OF EMPLOYMENT: _____

GUARDIAN'S ANNUAL INCOME: \$ _____

FATHER'S NAME: _____ OCCUPATION: _____

FATHER'S PLACE OF EMPLOYMENT: _____

FATHER'S ANNUAL INCOME: \$ _____

MOTHER'S NAME: _____ OCCUPATION: _____

MOTHER'S PLACE OF EMPLOYMENT: _____

MOTHER'S ANNUAL INCOME: \$ _____

TOTAL HOUSEHOLD ANNUAL INCOME: \$ _____ NUMBER OF PEOPLE IN HOUSEHOLD: _____

ARE ANY OTHER FAMILY MEMBERS ATTENDING COLLEGE? _____ IF YES, HOW MANY: _____

ARE YOU, YOUR SPOUSE, MOTHER OR FATHER A CURRENT MEMBER OF THE ALABAMA
ASSOCIATION OF SCHOOL OFFICE PERSONNEL? _____ IF YES, CHECK PERSON BELOW:

APPLICANT _____ MOTHER _____ FATHER _____ SPOUSE _____

NAME OF AASOP MEMBER: _____

NAME OF BOARD OF EDUCATION EMPLOYING AASOP MEMBER: _____

NAME OF SCHOOL EMPLOYING AASOP MEMBER: _____

WORK PHONE NUMBER OF AASOP MEMBER (____) ____ - ____

HOUSEHOLD ANNUAL INCOME \$ _____

NAME OF HIGH SCHOOL ATTENDING: _____

NAME OF COUNSELOR: _____ PHONE: (____) ____ - ____

GRADE POINT AVERAGE (4 POINT SCALE): _____ ACT OR SAT SCORE: _____
(CONVERT TO 4 POINT AVERAGE, IF NECESSARY)

NAME OF COLLEGE/SCHOOL YOU PLAN TO ATTEND: _____

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 EMPLOYMENT: _____ ANNUAL INCOME: _____

EMPLOYER: _____ ADDRESS: _____

DATES OF EMPLOYMENT: _____ ANNUAL INCOME: _____

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	OCCUPATION

ATTACH ADDITIONAL PAGES IF NEEDED.

THIS FORM IS FOR THE 2016-2017 SCHOOL YEAR AND IS DUE BY MARCH 1, 2017.

TASKS TO BE COMPLETED BEFORE APPLICATION CAN BE PROCESSED:

1. PLAN TO ENROLL IN COLLEGE OF BUSINESS OR K-12 EDUCATION.
2. **COMPLETE ALL 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. THIS IS NOT NECESSARY FOR AASOP MEMBERS APPLYING FOR THE SCHOLARSHIP IF 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 REQUIRED INFORMATION IS PROVIDED. (FILL IN EVERY BLANK)

DEADLINE: MUST BE RECEIVED BY MARCH 1, 2017.