

AASAF Scholarship Application 2010-2011

Student Name:

A#: Gender: Male Female

Permanent Mailing Address:

Primary contact #: Email address:

Term you plan to enter: Fall MC Fall I FCC Fall II FCC
 Spring MC Spring I FCC Spring II FCC

What is your cumulative grade point average (GPA):

(you must maintain a minimum GPA of 2.5 in order to be considered û use prior semester GPA)

Check the option that best describes your current educational goal:

Complete courses but not a degree Earn associate degree Earn bachelor's degree

Complete courses and transfer Earn associate degree and then transfer
 Undecided

What is your major field of study:

Indicate delivery method/location through which you will be taking courses:

On-campus Online On-campus and online

Will you be enrolled Full time (12+ credit hrs) ___Yes ___No

Activities/volunteer experience (attach additional sheet if necessary):

List all community and school activities in which you have participated. Include sports, student government, volunteer projects, etc. within the last year.

Activity From To

Student Essay (attach additional sheet if necessary):

Compose an essay that explains your educational plans and how those plans will lead to your chosen career. How did you choose that career and what influenced your decision? If selected, how do you plan to give back to your community by helping and serving others (tutoring, etc.)? Your essay will be a significant part of your application, so please give it considerable thought.

Certification and Signatures

In submitting this application, I certify that the information provided to the African American Staff, Administrators and Faculty Association is complete and accurate. Falsification of information will result in termination of any scholarship granted. I also certify that I have read the instructions and will comply with all requests for my transcripts or changes in my plans should I receive this scholarship. I understand that the AASAF scholarship may only be used towards _____ . I understand that this application is subject to verification by AASAF at its discretion.

Student signature: Date:

Student Appraisal

Student Name A#

Student Instructions: Have this form completed by a professor, community leader, counselor or other person in a position of authority who knows you and your accomplishments. Have him/her place the form in a sealed envelope and sign the seal for security. Enclose the unopened envelope along with your application. This form must be completed by someone other than a family member.

Appraiser's Instructions: Please briefly explain what you think is important about this student, e.g. his/her academic/personal characteristics, motivation, leadership potential, capacity for growth, respect and concern for others, etc. Return the completed form to the student in a sealed envelope (sign the seal for security).

I recommend this student: ___ With Reservation ___ Fairly Strongly
___ Strongly ___ Enthusiastically

Name Relationship to Student

Title Organization

Email Telephone

Signature Date

