**Jefferson County Assistant Principals Association  
  
*EDUCATION SCHOLARSHIP APPLICATION***

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
                Last         First             Middle Initial  
  
  
Step 1: **Make sure you qualify for this scholarship.** (Each item must be completed.)  
  
\_\_\_\_\_\_\_\_ I am a full time senior in a Jefferson County school.  
  
\_\_\_\_\_\_\_\_ I have achieved at least a 3.0 overall grade-point average on a 4.0 scale.  
  
\_\_\_\_\_\_\_\_ I am not receiving full reimbursement of the expenses of tuition, books, etc.

from my chosen College/University  
  
  
Step 2: **Provide all necessary information.**  
  
\_\_\_\_\_\_\_\_Completed, signed application  
  
\_\_\_\_\_\_\_\_Transcript  
  
\_\_\_\_\_\_\_\_ Application signed by Guidance Counselor or Principal  
  
\_\_\_\_\_\_\_\_Two (2) Recommendation Forms from academic references (faxed or emailed)  
  
\_\_\_\_\_\_\_\_500 word essay describing why you have chosen to pursue education as a career choice,

and what special talents or contributions you hope to make to the profession.  
  
  
All applications and accompanying documents must be submitted via email to:

     **Jason.stinson@jefferson.kyschools.us**

**RE: Jefferson County Assistant Principals Association Scholarship   
     Attn: Jason Stinson**

***Complete applications must be received on or before the close of business on May 29th, 2020. No late or incomplete applications will be considered.***   
 

**PLEASE PRINT OR TYPE**

l. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_  
         Last     First     Middle   
  
2. Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
3. E-mail Address:

4. Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
   
5. Parent(s) Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
   
    Parent(s) Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_           
   
6. School Currently Attending: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
7. College Planning to Attend: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8. Cumulative GPA =    \_\_\_\_\_\_\_\_\_\_\_\_\_\_

9. Academic Record: Please attach an unofficial transcript to your application.

10. Scholastic Honors Earned: (Attach a separate sheet or resume if necessary.)

11. Scholarships Received: (Indicate the date, amount and source of other scholarships awarded.

Attach a separate sheet if necessary.

12. Work Experience: (List any jobs, including summer employment, you have had.)

**References and Essay Requirements**

1. **RECOMMENDATIONS**: Complete the top portion of both recommendation forms (pages 4-5 of packet) and give to your references. Please have your reference sheets faxed or emailed to Artie Dietz before the due date (see information on page one).
2. **ESSAY***:  On a separate sheet, in 500 words double spaced, explain why you have chosen to pursue education as a career choice, and what special talents or contributions you hope to bring to the profession.*

**TO BE COMPLETED BY APPLICANT:**

Read the following statement completely, and sign below:

I affirm that the information provided on and with this application is true, to the best of my knowledge. I further affirm that I am not receiving full reimbursement for the expenses of tuition, books, etc., from any other source. I understand that the scholarship amount offered is $500.00, and the funds will be sent directly to the Bursar of the chosen College/University upon my enrollment. **I also understand that it is my responsibility to contact Ms. Dianna Kurtz (Dianna.kurtz@jefferson.kyschools.us) via email upon my enrollment, so that the funds may be released.**

Applicant's Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:    \_\_\_\_\_\_\_\_\_\_\_

**TO BE COMPLETED BY GUIDANCE COUNSELOR OR PRINCIPAL:**

Read the following statement completely, and sign below:

I certify that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is a full-time student

at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ High School.  
 

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**RECOMMENDATION FORM #1**

Applicant's Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**I (the applicant) waive the right to review the recommendation form after it has been completed.**  
Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**To be completed by Reference**

**1. Evaluate the applicant by checking the appropriate box.  
Intellectual Ability**  
    Good (Upper 25%) \_\_\_\_\_ Excellent (Upper 15%) \_\_\_\_\_ Exceptional (Upper 5%) \_\_\_\_\_  
  
**Work Ethic**  
  
    Good (Upper 25%) \_\_\_\_\_ Excellent (Upper 15%) \_\_\_\_\_ Exceptional (Upper 5%) \_\_\_\_\_  
  
**Leadership Ability**  
  
    Good (Upper 25%) \_\_\_\_\_ Excellent (Upper 15%) \_\_\_\_\_ Exceptional (Upper 5%) \_\_\_\_\_  
  
  
**2. In the space below, provide your appraisal of the applicant. (Attach a separate sheet if necessary.)**    

Reference's Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Reference: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Recommendation must be returned Jason Stinson [jason.stinson@jefferson.kyschools.us](mailto:jason.stinson@jefferson.kyschools.us))

**RECOMMENDATION FORM #2**

Applicant's Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**I (the applicant) waive the right to review the recommendation form after it has been completed.**  
Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**To be completed by Reference**

**1. Evaluate the applicant by checking the appropriate box.**  
**Intellectual Ability**  
    Good (Upper 25%) \_\_\_\_\_ Excellent (Upper 15%) \_\_\_\_\_ Exceptional (Upper 5%) \_\_\_\_\_  
  
**Work Ethic**  
  
    Good (Upper 25%) \_\_\_\_\_ Excellent (Upper 15%) \_\_\_\_\_ Exceptional (Upper 5%) \_\_\_\_\_  
  
**Leadership Ability**  
  
    Good (Upper 25%) \_\_\_\_\_ Excellent (Upper 15%) \_\_\_\_\_ Exceptional (Upper 5%) \_\_\_\_\_  
  
  
**2. In the space below, provide your appraisal of the applicant. (Attach a separate sheet if necessary.)**    

Reference's Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Reference: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Recommendation must be returned to Jason Stinson @ [jason.stinson@jefferson.kyschools.us](mailto:jason.stinson@jefferson.kyschools.us))