TO: Seattle Public School Graduating Seniors Class of 2017

FROM: Sandra Warner and Teresa Olmsted, Scholarship Chairs

 Sand Point Elementary (ES-269), Olympic View Elementary (EL-262)

RE: SAEOP Scholarship Application Information

Enclosed is an application form for the annual Seattle Association of Educational Office Professionals (SAEOP) Scholarship. This year we are proud to continue the tradition of awarding one (1) five hundred dollar ($500) scholarship.

We are seeking all interested and qualified Seattle Public High School graduating senior student (class of 2017) who wish to continue their education at a 2-year, 4-year college or vocational school. Please keep in mind throughout the application process that this is not a need-based scholarship.

The deadline for returning applications is **Friday, April 7, 2017**. They should be sent to:

Mail: Sandra Warner

 Sand Point Elementary

 6208 60th Ave NE

 Seattle WA 98115.

Or through inter-district school mail at:

 Sandra Warner

SAEOP Scholarship Chair

 Sand Point Elementary

 MS: ES-269.

The winning scholarship recipient will be expected to provide the higher institution name/contact information to issue a check on behalf of the student to said institution. This information must be provided by June 30, 2017. If the information is not received by June 30, 2017, the scholarship will be forfeited and granted to the next qualified candidate.

If you have any questions or need further clarification, please feel free to call Sandra Warner at (206) 252-4640 or email at sjwarner@seattleschools.org

Scholarship packets are also available online at [www.saeop.org](http://www.saeop.org). Thank you.

**SCHOLARSHIP APPLICATION FORM**

**Application must be typed to be considered (including this page) (Copy and paste to a word doc)**

1. **Full Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Last First Middle

1. **Home Address**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 City State Zip Code

3. Contact Information:

 **Home Telephone**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Cell Number**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  **Email**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Name of three higher educational institutions you have applied to:

* Name of Institute: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* Name of Institute:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* Name of Institute: \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Judging criteria:

Applicants will be judged on neatness, spelling, punctuation, grammar, clarity of thought, and completeness of application. Please remember this is not a need based scholarship.

**Applications must be postmarked by Friday April 7, 2017**. Late applications will not be considered.

**Essay:**

* **In an essay of *300 words*, answer the following question:**

**Describe how your most meaningful achievement relates to your field of study and future goals.**

**Or:**

**What special attribute or accomplishment sets you apart from the other students and makes you a good candidate for this scholarship.**

**Include the word count at the end of your essay.**

**FACULTY RECOMMENDATION FORM**

**Candidate’ Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

I recommend this student for the Seattle Educational Office Professional Scholarship on the basis of: (Please list attributes)

* School activities:
* Classroom work, attitude, etc.:
* Student’s character:

Signature of Faculty Date

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Print Name

Name and Address of High School

**COUNSELORS RECOMMENDATION FORM**

**Candidate’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**I recommend this student for the Seattle Educational Office Professional Scholarship on the basis of: (Please list attributes)**

* **School activities:**
* **Classroom work, attitude, etc.:**
* **Student’s character:**

Signature of Counselor/Dean Date

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Signature of Principal Date

Name and Address of High School

**Scholarship Application Checklist**

□ **Application Form**

□ **Official Transcript**

□ **Essay**

□ **Counselors Recommendation form or letter of recommendation**

**□ Faculty Recommendation form or letter of recommendation**

Application packet must be typed and postmarked by **Friday, April 7, 2017** to be considered.

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