

ALABAMA ASSOCIATION OF FAMILY AND CONSUMER SCIENCES

**SCHOLARSHIP
FAMILY AND CONSUMER SCIENCES EDUCATION MAJOR**

**APPLICANT MUST ALREADY BE ADMITTED TO THE TEACHER
EDUCATION PROGRAM**

One \$1000 scholarship will be awarded to an outstanding student enrolled in Family and Consumer Sciences Education in an Alabama Four Year College or University. The applicant is highly encouraged to be a paid student member of AAFCS. The applicant must already be admitted to the teacher education program.

TERMS OF AGREEMENT

- 1. A check for the total amount of scholarship will be presented to the College/ University where student is enrolled. Scholarship recipient must have provided to the ALAFCS President proof of enrollment in a Family and Consumer Sciences Teacher Education Program (See Verification of Enrollment Form) before check is mailed.**
- 2. The scholarship application will be judged by a committee composed of ALAFCS members.**
- 3. Deadline for application: postmarked by January 15 to ALAFCS Scholarship Chairman (Judy Brown).**

Checklist for Application

_____ Official application form (typed)

_____ Verification of Enrollment Form (completed and signed by school official)

_____ Official Transcript (undergraduate and/or graduate)

_____ Three letters of recommendation

_____ Family and Consumer Sciences teacher/professor

_____ Other university reference

_____ Personal recommendation

_____ AAFCS Membership # _____

ALABAMA ASSOCIATION OF FAMILY AND CONSUMER SCIENCES

**SCHOLARSHIP APPLICATION
FAMILY AND CONSUMER SCIENCES EDUCATION MAJOR**

FULL NAME _____ BIRTHDATE _____

LAST 4 DIGITS OF SOCIAL SECURITY NO. _____ Email _____

ADDRESS _____

City

State

Zip

HOME TELEPHONE NO. _____ CELL PHONE NO. _____

COLLEGE OR UNIVERSITY ATTENDING _____

MAJOR _____ HOURS EARNED _____

GRADE POINT AVERAGE OVERALL _____ CHECK POINT SYSTEM USED: 3.0 _____ 4.0 _____

IF APPLYING AS AN UNDERGRADUATE STUDENT, SPECIFY YOUR CLASSIFICATION:

Sophomore

Junior

Senior

IF APPLYING AS A GRADUATE STUDENT, SPECIFY WHAT YOUR UNDERGRADUATE DEGREE WAS IN _____ YEAR RECEIVED _____

RECEIVED FROM _____ COLLEGE / UNIVERSITY

NAME(S) OF PARENT/GUARDIAN _____

ADDRESS _____

City

State

Zip

PARENT'S TELEPHONE NUMBER () _____

AAFCS MEMBERSHIP NUMBER _____

- ATTACH VERIFICATION OF ENROLLMENT FORM
- ATTACH OFFICIAL COLLEGE TRANSCRIPT(S)
- ATTACH THREE LETTERS OF RECOMMENDATION

If selected, I agree to the Terms of Agreement for THE ALABAMA ASSOCIATION OF FAMILY AND CONSUMER SCIENCES SCHOLARSHIP. (See Attached)

Applicant's Signature

Date

SEND COMPLETED APPLICATION POSTMARKED NO LATER THAN JANUARY 15 TO:

Judy Brown
Career and Technical Education
Alabama Department of Education
P.O. Box 302101
Montgomery, AL 36130-2101

334-242-9113 Phone
334-242-0234 FAX
jbrown01@alsde.edu

ALAFCS Scholarship Applicant:

Please have the College/University Admission office complete the following information and submit the form to Judy Brown, ALAFCS Scholarship Chair. If selected as the scholarship recipient, payment for the \$1000 scholarship will be forwarded to the College/University bursar's office. Please call or email Judy Brown, at (334) 242-9113 or jbrown01@alsde.edu if you have any questions.

Mail form to:
Judy Brown
Career and Technical Education
State Department of Education
P. O. Box 302101
Montgomery, AL 36130-2101

VERIFICATION OF ENROLLMENT FORM

Name of Student: _____

Last Four Digits of Social Security Number: _____

Name of College/University: _____

Major: _____

Classification (Undergraduate/Graduate): _____

Date of enrollment in the TEACHER EDUCATION PROGRAM: _____

I certify that the following student is currently enrolled.

Print Name and Title: _____

Signature: _____

Phone Number: _____

Date: _____