



Dear Applicant;

Enclosed is the 2024 Alaska State Association of Emblem Clubs Scholarship application. This Award is for \$3000.00. You should receive a total of four pages including this cover letter.

The purpose of this scholarship is to assist students who are serious about continuing his/her education. The scholarship is offered to graduating seniors, GED recipients, or students already attending University, College, or Trade School. Applicant must have applied/been accepted into, or enrolled in a college, university, or vocational training program. Applications will be scored based on the following criteria: academic achievement, financial need, educational goals, leadership abilities, community involvement, activities, achievements, honors, awards and recognitions, completeness, neatness, and timeliness.

COMPLETED APPLICATIONS MUST BE RECEIVED (NOT JUST POSTMARKED BUT RECEIVED) BY 7:00 PM, MARCH 30, 2024 – NO EXCEPTIONS!

Please verify that your Scholarship Packet contains the application, copy of the transcripts, three letters of recommendation (from other than family members), and the short essay.

Completed applications can be mailed to : Fairbanks Emblem Club. PO Box 70695, Fairbanks, AK. 99707

If you have any questions, I can be contacted at the following:

Cell phone: 907-347-4244

Email: millie.peek@yahoo.com

Millie Peek

Scholarship Chairperson

ALASKA STATE ASSOCIATION OF EMBLEM CLUBS

SCHOLARSHIP APPLICATION

Date Applied _____

(Please print or type)

PLEASE SUBMIT ALONG WITH THIS APPLICATION:

- Three letters of recommendation (from other than family members)
- Copy of transcripts
- A short essay of no more than 250 words describing your need for this scholarship

SECTION 1: PERSONAL INFORMATION

NAME: _____

BIRTH DATE: _____ AGE: _____

PERMANENT MAILING ADDRESS:

Street

City, state, zip

Phone number (including area code)

email address

NAME OF PARENTS OR GUARDIAN: _____

FATHER'S OCCUPATION: _____

MOTHER'S OCCUPATION: _____

NAME AND AGES OF OTHER MEMBERS OF FAMILY IN HOUSEHOLD:

NAME OF HIGH SCHOOL: _____

ADDRESS OF HIGH SCHOOL: _____

NUMBER OF STUDENTS IN GRADUATING CLASS: _____ CLASS RANK: _____

GPA: _____

Name _____

SECTION 2: OCCUPATIONAL GOALS AND STATEMENT OF FINANCIAL NEED:

MAJOR OR VOCATIONAL COURSE OF STUDY: _____

OCCUPATIONAL/VOCATIONAL GOAL _____

AT WHAT COLLEGE, UNIVERSITY, OR VOCATIONAL SCHOOL WOULD YOU PLAN TO USE YOUR SCHOLARSHIP? _____

HAVE YOU APPLIED? _____ HAVE YOU BEEN ACCEPTED? _____

WHEN DO YOU PLAN TO ENROLL? _____

EXPECTED DEGREE OR CERTIFICATE: _____

NAME AND ADDRESS OF SCHOOL FINANCIAL AID OFFICE:

PHONE NUMBER: _____

SUMMARY OF ANTICIPATED EXPENSES FOR THE YEAR:

Tuition and Fees	\$ _____	Personal Expenses	\$ _____
Room and Board	\$ _____	Transportation	\$ _____
Textbooks and Supplies	\$ _____	Other Expenses	\$ _____

Total Anticipated Expenses \$ _____

HOW DO YOU EXPECT TO MEET THESE EXPENSES?

Name _____

SECTION THREE - YOUR SPECIAL QUALITIES:

LEADERSHIP

List offices held and positions of responsibility held in high school:

HONORS, AWARDS, ACHIEVEMENTS:

ACTIVITIES:

In School

Out of School

COMMUNITY SERVICE & INVOLVEMENT:

WORK EXPERIENCE:

Signature of Applicant: _____

Date _____