

Florida Business Professionals of America Beverly William's Scholarships

Application Process and Checklist

- The completed application package must be submitted to Florida BPA **e-mailed or postmarked no later than January 13, 2020**. Applications may be submitted for any active member of Florida BPA.
- Scholarship applications should be sent directly to:

Florida BPA Scholarship Committee

38955 C Ave

Zephyrhills, FL 33542

- OR -

This application can also be e-mailed to the following e-mail addresses:

dalexander@flbpa.org

(Applications may not be faxed. For more information, contact Florida BPA)

- Scholarship winners will be announced at the Special Recognition Banquet of the annual State Conference
- Florida BPA will pay awards directly to the recipient upon receipt of proper documentation.

Florida BPA is responsible for evaluating and selecting scholarship recipients. Interested students must complete the application and mail it along with a current, complete official transcript of grades and supporting materials to the Florida BPA Scholarship Program.

These items must be included, *in the following order*, with the application package:

- 1. The completed application form
- 2. An official, current high school transcript
- 3. SAT scores or American College Testing Program scores.
(If not available, please include a statement indicating not currently available.)
- 4. A statement of BPA (if applicable) participation and accomplishments
(add one or two pages if needed)
- 5. Substantiating evidence of leadership, responsibility and character other than through BPA
- 6. Two letters of recommendation: one from a BPA advisor and one other
- 7. Supplemental information that may be useful to the selection committee

*In addition, applicants must send materials clipped together if mailed or scanned in order if e-mailed. Pocket folders, brieffolios, or binders may not be used. Sheet protectors are not permitted. Incomplete applications will not be considered.

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Any **currently** active Florida BPA member who intends to pursue a full-time, two or four-year course of study in business, entrepreneurship or management may apply. The applicant may select any accredited institution/university offering careers in business, management, or entrepreneurship. The Florida BPA Scholarship is merit-based, not based on financial need. However, if an applicant chooses, he or she may include a statement in support of financial need and it will be reviewed.

Name: _____ Date of birth: _____

Address: _____ Phone: _____

City: _____ State/Province: _____ Zip: _____

E-mail: _____

Parent's Name: _____

Name and address of institution you plan to attend: _____

Have you applied?: _____ Been accepted?: _____

Major field of study: _____

Name and complete address of present school: _____

Name of BPA advisor(s): _____

Phone: _____ Dates of BPA involvement: _____

Place of employment (if any): _____

List involvement at the local level that helped organize and promote BPA (e.g., offices held, committee service). (Use one additional page, if necessary.): _____

List current involvement in other youth, social, civic, school or faith-based groups. (Use one additional page, if necessary.)

What is your career interest: _____

Describe your career objectives and ambitions. (Use one additional page, if necessary.): _____

Describe how business education and BPA have assisted you in progressing toward your career objective. (You may include one page of material in support of this section.): _____

List involvement at the state/ national levels (e.g., competitive events, special projects, leadership activities). (Do not exceed two pages.): _____

Are you interested in becoming involved with Florida BPA Alumni Division?: Yes No

I certify that the information given on this application is correct. Should I be awarded a scholarship, I agree to give strict attention to my studies and the regulations of the college. If I should fail to make a satisfactory record in my college work, change my course of objective from business, entrepreneurship and/or management, or willfully violate college regulations, I agree to surrender all rights of ownership to the unused portion of the scholarship. It is my understanding that if this application is accepted, and if I am granted a scholarship award from BPA there is no interest charge on the funds received.

Signature of Applicant: _____

Date: _____

School Official's Evaluation

Applicants ranks: _____ In school class of: _____ (numerical rank).

General ability of student (circle one): Excellent Very good Average

Grade point average achieved by student: _____

High School: 9th 10th 11th 12th

Indicate (circle one): 4.0 system Other If other, specify the system: _____

Print School Official Name: _____ Signature of School Official: _____

Title: _____ Date: _____

Florida BPA Chapter Advisor

I, _____, do hereby certify that the information supplied by this applicant is true and accurate to the best of my knowledge. My written evaluation is attached.

Signature of chapter advisor: _____ Date: _____