

2019 Ann Wade Strength in Education Scholarship

Oklahoma ASBO is providing one, \$2,000 scholarship for a student pursuing a degree within the K-12 education field from an academic institution beyond high school.

Criteria

- □ Graduating high school senior
- □ Resident of the state of Oklahoma
- Pursuing a certified degree in education or directly support the education system, including (but not limited to);
 - Teaching
 - School Administration
 - Counselling
 - Librarian
 - Child Psychology
 - Occupational Therapy (speech, learning disabilities, etc.)
 - Dietician

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- Music Instructions
- Letter of recommendation
 - From school administrator, teacher, counselor, coach, or another civic leader
- □ Letter of application

Applicants should submit a letter of application that covers some of the following questions;

- Why they chose their specific career path
- The impact they want to make in education, the classroom, or the lives of children
- Describe an issue/program that they've experienced or seen that they want to change or improve or Provide an example of an experience or program that made an impact upon them as a student
- Applicate must attend a school district who is a current Oklahoma Association of School Business Officials institutional member

Application Submission

All materials must be received by March 15, 2019 at: Oklahoma ASBO Attn: Ann Wade Scholarship P.O. Box 18882 Oklahoma City, OK 73154

Selection Criteria

- □ Oklahoma ASBO Board will serve as the selection committee.
- □ Recipient will be chosen who best fits the mission and spirit of the program
- □ As a guideline, applications will be reviewed and selected based upon the materials submitted:
 - 30% scholarship
 - 50% letter of application
 - 20% letter of recommendation

Scholarship Distribution

Scholarship award amount will be distributed to the college, university or vocational school student will be attending. Funds cannot be distributed directly to the student.



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Personal Information					
Name:	Middle]	Last	
Address:					
City:	State:	Zip Code:			
Phone Number:	(ł	nome/cell)			
Email Address:					
Date of Birth:					
Academic Information					
High School Graduation Date:					
Name of High School Attending:					_
Address:					
City:			State:	Zip Code:	_
Cumulative GPA:					
Name of College, University or Techn	ology Center	attending during	2018/2019 Ac	cademic Year:	
Address:					
City:		State:	Zip Co	ode:	
Anticipated Degree Completion Date:					
Planned Area of Study in the K-12 Edu	acation Field	:			
Signature:		Da	ate:		



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Activity		Roles and Responsibilities
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Other Information

Yes	No	
		I am a U.S Citizen and resident of the State of Oklahoma
		I have applied or have been admitted to a college, university or technology center that offers a certified degree program in the K-12 education field
		I took the SAT and/or ACT
		I have a relative who works for Oklahoma ASBO or is on the OKASBO Board of Directors