

DATE: _____



Jack Harrel Professional Development Scholarship

				hip. This scholarship is for an OKASBO
				ays for room, transportation, itional Conference. The recipient will
be selected by the OKASB	3O Professional Developme	ent Committee and recom	mended to the	Board of Directors for final approval.
Applicant Information				
Full Name				
	First	M.I.	Last	
School District				
District Address				
	Street			Apt. Number
	City	Stat	te	Zip Code
Work Phone	() -	Cell	l Phone	() -
District Position				
Assurances				
Assurances				
OKASBO Membership	p Status	Current Member \square		Not a Current Member \square
Continuous Members	ship	# of Years:	-	
Previous Attendance	of ASBO			
International Conference		I have attended ASB	ve attended ASBOi \square I have Not attended ASBOi \square	
I agree to write a reflection of my experience and knowledge gained during the conference. Please Initial:				Please Initial:
This grant pays for room, transportation, registration, meal per diem and dues (if needed).				
Other additional personal expenses will be paid by my sch district or by me.				Please Initial:
Narrative Narrative				
Attach a one-page narrative stating why you should receive the Jack Harrel Professional Development Grant and what you will do with the knowledge gained by attending the conference				
Applicate Signature				
Superintendent Signa	ature			
Submit Application To:				
OKASBO, Attn: Jack Harrel Scholarship - PO Box 32364, Edmond, OK 73003				
	Δnnlica	tion Due Date: J	une 30th	
	Дррпса	tion but but. J	and John	

Updated: 1/13/22