



**Nebraska FCCLA
State Peer Officer Team Scholarship Award Policies**

I. Guidelines:

1. The Nebraska SPOT shall award one \$300 scholarship to an outstanding FCCLA member planning to enroll in a four-year accredited college or university. Preference will be given to applicants who are entering a family and consumer sciences/FCCLA related career field.
2. The award shall be paid in full during the first year in college (\$150 per semester).
3. When enrollment has been completed in the college chosen by the applicant and a written notice has been returned to the State Adviser from the applicant, the award shall be paid to the college or university financial officer. Should the recipient have enough scholarships to cover the full cost of enrollment, the funds may be applied to housing, books, or other education related expenses. The recipient must enroll in a college or university within six months after graduation from high school or the recipient will no longer be eligible for this award.
4. Should the recipient withdraw from college or change major during the freshman year, the balance of the award shall be available to an alternate. The recipient shall notify the State Adviser in writing of this change prior to the date on which fees are payable.
5. The award shall be announced at the State Peer Education Conference but the recipient does not need to be present.

II. Qualifications:

1. The applicant shall be a member of an active chapter of the Nebraska FCCLA Association and shall have been such a member for at least one year.
2. The applicant shall have participated actively in own FCCLA chapter.
3. The applicant shall have been enrolled in family and consumer sciences/family and consumer sciences related occupations classes for at least one semester.
4. The applicant shall be a senior in an accredited high school expecting to graduate at end of the school year and shall have maintained an 85% accumulative average during high school.
5. The applicant shall be recommended by a local FCCLA adviser and a school administrator.
6. The applicant shall keep the State Adviser up to date regarding any changes in major and academic and enrollment status.

III. Rules for Applying:

1. The applicant shall acquire a current scholarship application form online. All applications and supporting materials must be sent electronically to the Scholarship Chair by February 1st.
2. The applicant's adviser should get all of the sealed information, application, and transcript and submit on behalf of the applicant. (Note: If the applicant's adviser is the applicant's parent/guardian, this should be completed by another representative from the school.)
2. The applicant may choose any four-year college or university. The applicant shall not transfer from chosen school except to one meeting like qualifications.
3. Any FCCLA chapter member of the Nebraska FCCLA Association fulfilling the stated qualifications may make application regardless of financial need.
4. The State Peer Officer Team/Advisers, or their designees, shall serve as the scholarship committee and shall name the recipient and the alternate.
5. If unable to accept the award, the recipient shall notify the State Adviser immediately; the award shall then be given to an alternate.

Submit electronically by February 1 to:

Angie Ehlers
angie.ehlers@overtoneagles.org



Nebraska State FCCLA
State Peer Officer Team Scholarship Application

Part I--Personal Information

Name				Chapter			
Home Address				City		Zip	
Phone Number				Email			
Parent/Guardian Name(s)							
Date of Birth				Date of Graduation			
Number of semesters of FACS instruction				Number of semester courses offered			
Number of years of membership in FCCLA				Grade level FCCLA membership first available			

Part II--Academic Information (to be completed by school counselor)

Graduating Class Size		Class Rank	
Scholastic Average by %		ACT Composite	
SAT Verbal		SAT Math	

Part III--Future Plans

Which accredited 4-year college do you plan to attend?

As a prospective professional, what will be your area of study and career goal?

Explain why you have chosen this particular field.

Part IV--Leadership Involvement

Describe your involvement in FCCLA.

Describe your experiences in promoting the goals of the Family Leader Team (National Programs, Outreach, etc.).

Describe your experiences in promoting the goals of the Community Leader Team (National Programs, Outreach, etc.).

Describe your experiences in promoting the goals of the Family Leader Team (National Programs, Outreach, etc.).

Be sure to check that all of the following items are enclosed or completed. Failure to provide all of these items will result in a disqualification. Each of these items are to be given **sealed** to the chapter adviser or other non-related school official. The applicant's representative should get all of the sealed information, application, and transcript and submit on behalf of the applicant. (Note: If the applicant's adviser is the applicant's parent/guardian, this should be completed by another representative from the school.) Recommendations are to include specific leadership qualities of the applicant.

- a. Recommendation of FCCLA adviser.
- b. Recommendation of a school administrator.
- c. A transcript of high school grades.

Part V--Statement of FCCLA Adviser and Guidance Counselor

I have examined this application and find the record true, complete, and accurate.

Name of FCCCLA Adviser

Signature of FCCLA Adviser

Date

Name of Guidance Counselor

Signature of Guidance Counselor

Date

Part VI--Statement of Applicant and Parent/Guardian

I hereby certify that:

1. The information provided in this application is true, complete and accurate.
2. I have read and understand the rules governing the scholarship.
3. I will abide by the rules governing the scholarship.
4. If I fail to fulfill the rules governing the scholarship, I will repay the scholarship on the same terms it was disbursed. Repayment will begin within sixty days following certified notification of non-eligibility or scholarship forfeiture.

Signature of Applicant

Signature of Parent/Guardian

Date