

# KAA Auxiliary Scholarship Application

Apply Today! One \$500 scholarship will be awarded at  
The 2019 KAA State Convention

### Who is Eligible?

- A relative of an active Auxiliary Member in good standing for a period of two years.
- Candidates applying must be graduating from an accredited high school and/or candidate must have completed the past year at a qualified university or school of higher education.

### Student:

1. Complete the contact confirmation on the bottom section of this form and make three copies.
2. Have your school's counselor/scholarship advisor complete one copy of the form and attach an official transcript.
3. Have a teacher complete one copy of this form.
4. Have a coach, activity director, a minister, or an employer complete the third copy of this form.
5. Have each one send the recommendation form directly to the address below by December 25, 2018:
6. List and detail:
  - \* all school activities in which you have participated.
  - \* hours of school activities (community services, scouts, church volunteer work, etc.)
  - \* work experience
  - \* all awards and honors
7. Include a personal essay of 500 words or less explaining what you hope to accomplish in your lifetime.
8. Please tell us a little more about yourself, including what college (s) you have chosen, or enrolled in, what subject (s) you are considering for your college major, and what vocation or career you are considering.

### Tell Us About Yourself!

Name \_\_\_\_\_ Birth Date \_\_\_\_\_  
 Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Age \_\_\_\_\_ Phone \_\_\_\_\_ GPA \_\_\_\_\_  
 Rank in Graduating Class \_\_\_\_\_  
 Total number in Graduating Class \_\_\_\_\_  
 Accepted at/Attending \_\_\_\_\_  
 Name of KAA Auxiliary Member and Relationship \_\_\_\_\_  
 Parents Names and Occupation \_\_\_\_\_

**References:** Please mark the appropriate space in each area to evaluate the applicant. Attach a separate sheet for comments using school or employer letterhead and mail back with your recommendation.

Student's Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_  
 State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Send completed form to:  
 KAA Auxiliary Scholarship  
 Julie Kessler  
 6919 Old Lebanon Rd.  
 Campbellsville, KY  
 42718

|   | Excellent | Good  | Average | Below Average |
|---|-----------|-------|---------|---------------|
| Seriousness of purpose                      | _____     | _____ | _____   | _____         |
| Ability to Study                            | _____     | _____ | _____   | _____         |
| Ability to communicate Orally               | _____     | _____ | _____   | _____         |
| Ability to communicate in Writing           | _____     | _____ | _____   | _____         |
| Initiative                                  | _____     | _____ | _____   | _____         |
| Responsibility                              | _____     | _____ | _____   | _____         |
| Emotional Stability                         | _____     | _____ | _____   | _____         |
| Concern for Others                          | _____     | _____ | _____   | _____         |
| Overall Recommendation For Academic Promise | _____     | _____ | _____   | _____         |
| For Personal Promise                        | _____     | _____ | _____   | _____         |

Your Name \_\_\_\_\_  
 Signature \_\_\_\_\_  
 Position \_\_\_\_\_  
 School/Company \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Phone \_\_\_\_\_

How long have you known the applicant? \_\_\_\_\_