

The North Texas Facilities Services Association (NTFSA) is pleased to offer this application for scholarship to students pursuing a degree in the education or facilities services arena. Students attending NTFSA member districts and entering into a post-secondary education program focused on education and facilities services fields at accredited colleges and universities are invited to apply.

**The following items must be completed and received by 4:00 p.m. CST on Friday, March 22, 2024 to be considered:**

 The NTFSA Student Scholarship Application (attached).

* Please **Type or Print** clearly and attach additional sheets as necessary.

 Recommendations

* We will accept recommendations from up to three references, but we must receive at least one from a non-relative.
* A recommendation form is part of this packet. Please forward a copy of this form to each selected reference.
* Additional recommendations may be submitted from employers, NTFSA members or other personal references to provide deeper insight to the applicant’s character.
* The reference is asked to provide a short description or letter explaining why the applicant should receive an education or facilities related scholarship. This description should be returned with the Recommendation Form.
* All recommendation documents should be submitted with the application.

 A copy of the applicant’s transcript through the end of the junior school year.

 A copy of the applicant’s 6-weeks report card through the end of the 4th 6-weeks.

 **Upon award, scholarship recipients are required to attend the NTFSA chapter meeting on April 18, 2024 at 11 a.m. to be recognized for their award. If the student cannot attend this meeting, they must provide a 2–5-minute acceptance video describing their higher education goals by May 15th at 4 p.m.**

**Completed applications should be emailed to:**

Todd Lane,

Director of Maintenance

Arlington ISD

tlane3@aisd.net

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**STUDENT SCHOLARSHIP APPLICATION**

Name (LAST) (FIRST) (Middle)

Gender  Male  Female



Home Address City Zip

Telephone E-Mail Address

Date of Birth Social Security #

Middle School attended High School

School District Graduation Date

Name of Parent/Guardian

I have taken the … SAT  yes  no ACT  yes  no

College/University chosen

Degree Sought Major Field of Study

Expected month and year of college graduation

# FINANCIAL

Rate Your Financial Need:  Extreme  Significant  Helpful Will you work while in college?  Yes  No

Will you work during the summer?  Yes  No

# OTHER FUNDING RESOURCES

List any scholarships, grants or other funding resources you have received or expect to receive:

|  |  |  |
| --- | --- | --- |
| Source or Fund | When Received | Amount |
|  |  |  |
|  |  |  |
|  |  |  |

Attach additional pages as needed.

# EXTRA-CURRICULAR ACTIVITIES

List any activities outside of education courses in which you have participated or are participating. This would include clubs, associations, and employment. Also list any awards or recognition you have received.

|  |  |
| --- | --- |
| Activities, Offices Held and Awards/Recognition Received | When Received |
|  |  |
|  |  |
|  |  |

Attach additional pages as needed.

# ESSAY

Provide a short essay explaining why you wish to study education or facilities services, or a field that directly impacts education or facilities services. Include insight to your personal, education, and professional goals and how this scholarship will impact your ability to succeed. The essay should be on an attached page and be a maximum of 800 words.

# MISCELLANEOUS COMMENTS

Provide any other information you would like the committee to know about you. This can be on an attached page.



# APPLICANT’S STATEMENT

By submitting this application, you indicate your acceptance of these conditions:

1. I am or will be a student in good standing at the time of receipt of this scholarship.
2. I will only use the scholarship funds for payment of tuition and required fees, room and board, and for institutional equipment, materials, and books.
3. I hereby acknowledge that the information submitted herewith is true and correct.
4. If selected, I will do my best to attend the NTFSA scholarship recognition meeting.

Signature Date

# COUNSELOR’S SCHOLARSHIP VERIFICATION

I have reviewed this application.

Signature Date



# STUDENT SCHOLARSHIP RECOMMENDATION

 Applicant Name:

Name: Phone:

Title or Position:

Name of Institution:

How long have you known this applicant?

In what capacity:  Student  Employee  Other

Please indicate your opinion of this student as a candidate for a scholarship on the basis of:

Don’t

Weak Strong Know

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| A. Character | 1 | 2 | 3 | 4 | 5 |  |
| B. Leadership | 1 | 2 | 3 | 4 | 5 |  |
| C. Financial Need | 1 | 2 | 3 | 4 | 5 |  |
| D. Interest in Education/Facilities | 1 | 2 | 3 | 4 | 5 |  |
| E. Academic Record | 1 | 2 | 3 | 4 | 5 |  |
| F. Diversity of Activities | 1 | 2 | 3 | 4 | 5 |  |
| G. Drive/Work Ethic | 1 | 2 | 3 | 4 | 5 |  |

Please use the back of this page or a separate sheet to tell why you think this applicant should receive an education or facilities services related scholarship. **This part of the recommendation is important!**

Signature Date