

Kern Association of Educational Office Professionals



Student Scholarship Opportunity

Provided to assist students who wish to continue with higher education and pursue a career in business administration or education.

The 2024-2025 scholarship is valued at \$1,000.00. Please read carefully and follow the accompanying Guidelines.

Application and accompanying materials **MUST** be postmarked by **March 14, 2025** and mailed to:

Elsa Flores, Anna Espinoza
Scholarships Chairs
P.O. Box 42844
Bakersfield, CA 93384

Applications can also be dropped off at the KCSOS office at 1300 17th St, 6th floor
Or emailed to kaeopmain@gmail.com

Kern Association of Educational Office Professionals

Student Scholarship

2024-2025 Application & Guidelines

The 2024-2025 scholarship is valued at \$1,000.00. More than one scholarship may be awarded.
This scholarship is a “tuition-only” scholarship.

CRITERIA

- Need for financial assistance
- Scholastic achievement
- Initiative
- Extracurricular Activities and
- Quality and completeness of application materials

TO QUALIFY

- Applicant must be a graduating high school student who has made application to continue his/her education OR the applicant may currently be pursuing such a course of study in an institution of higher education.
- Applicant must have maintained a grade point average of 2.0 or better in high school.
- Applicant must have applied for admission to a post-high school accredited institution and plan to enter following the granting of the scholarship, or already be enrolled in an accredited college or university.
- Applicant must be a resident of Kern County.
- Applicant must intend to continue his/her education in the field of business administration or education.
- Applicant shall be responsible for the completion and return of all required support materials to the KAEOP Scholarship Chairman before the deadline date.

APPLICATION

An application will be considered complete when the KAEOP Scholarship Chairman has received the following items:

- Completed application and biographical information forms included on pages 4 and 5.
- **Official** copy of high school transcript (or university/college transcript for higher education applicants) in a sealed envelope. High School transcript must indicate class rank. College transcript must show cumulative GPA.
- Completed one-page essay on “Why I am choosing a Career in Business or Education.”
- Submit THREE letters of recommendation: (a) from a principal, counselor or other school administrator describing the candidate’s activities, leadership record, character, personality, initiative, and home background; (b) from a language arts or math teacher, and (c) from someone other than a KAEOP member or other than a family member.

SELECTION CRITERIA/PROCEDURE

- Recommendations 10%
- Activities/School/Extracurricular 10%
- Financial Need 30%
- One-Page Essay 20%
- Scholastic Record (official transcript) 30%

The KAEOP Scholarship Chairman will select a panel of judges to review applications and select the winning application(s).

The KAEOP Scholarship Chairman will notify all applicants of the status of their application.

Students selected to receive a 2024-25 KAEOP Student Scholarship will be invited to attend the KAEOP Bosses Luncheon for presentation. The KAEOP Scholarship Committee will notify all candidates by April 14, 2025 as to its selection of scholarship recipients.

AWARD DISBURSEMENT

To receive the scholarship funds, the scholarship recipient should send verification of enrollment at an accredited college or university to the KAEOP Scholarship Chairman. Upon receipt of the enrollment verification, the KAEOP Scholarship Chairman will request payment. The check, for \$1,000.00, will be awarded within 30 days.

DELAY OF SCHOLARSHIP PAYMENT

If a scholarship recipient is unable to attend a post-high school institution during the term following the granting of the scholarship, and so notifies in writing to the KAEOP Scholarship Chairman, the award may be held over for one school year. The KAEOP Scholarship Chairman must receive this request letter no later than September 1st. Following receipt of the written request, the KAEOP Scholarship/Awards Chairman will confirm postponement of the scholarship award until the following year. Prior to August 1st of the following year, the scholarship recipient must request activation of their prior year scholarship by sending a letter to the KAEOP Scholarship Chairman along with proof of enrollment at a post-high school accredited institution.

CONTACT PERSONS: Anna Espinoza, Scholarship Co-Chairman
Elsa Flores KAEOP Chair
P. O. Box 42844
Bakersfield, CA 93384
Phone: (661) 636-4151/ Email: elflores@kern.org, anespinoza@kern.org

Kern Association of Educational Office Professionals
2024-2025 Student Scholarship Application

Please read the application guidelines prior to completing the application information requested below. For additional space, use an 8 ½ x 11 sheet of paper and attach. Type or print clearly.

Name of Applicant _____
First Middle Last

Home Address _____
Street City Zip

Telephone (_____) _____ Cell phone (_____) _____

Name & Address of high school: _____
Date of Graduation: _____

Are you currently enrolled in college? ___ yes ___ no If yes, name & address of college: _____

Are you a high school senior? ___yes ___no

If yes, list in order of preference three colleges, universities, or business schools to which you have formally applied for admission:

<i>Name of Educational Institution</i>	<i>Address</i>	<i>Accepted?</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____

If more space is needed for the following 5 items, attach another sheet(s).

List school extracurricular activities, including athletics, music, etc., and office held:

Academic awards or honors: _____

List your community (non-school) activities, including all offices held: _____

Have you worked part-time during your school career? If so, list:

<i>Where Employed</i>	<i>Primary Responsibility</i>	<i>Dates</i>
_____	_____	_____
_____	_____	_____

Please use this space to record additional information you feel would be of interest to the scholarship committee. _____

I certify the above is true and correct. I will use any funds received from KAEOP only for the purpose of paying expenses for my college education and I will notify KAEOP immediately if there should be any interruption in my plans for continuing my education this coming year.

Signature of Applicant Date: _____

Kern Association of Educational Office Professionals
2024-2025 Student Scholarship Application
Biographical Information Sheet

Name of Applicant: _____
First Middle Last

Father's Name: _____ Address : _____

Mother's Name: _____ Address: _____

Father's Occupation: _____ Mother's Occupation: _____

Number of parents' dependents (not including you) and their ages:

What is your chosen major? _____

What is your career objective: _____

Will your parents assist you financially in continuing your education? ____ yes ____ no

Will you have any other assistance (social security benefits, etc.)? ____ yes ____ no

Have you received any other scholarships? ____ yes ____ no

If yes, list name and amount : _____

How much anticipated annual assistance do you feel you will need to continue your education after
graduating from high school? _____

Please check the range of your family's annual income:

____ Below \$25,000 ____ \$25,000-39,999 ____ \$40,000-69,999 ____ \$70,000 or more

List any other family/financial/personal adversity circumstances, which should be considered:

I certify the above is true and correct.

_____ Date: _____

Signature of Applicant

**MUST BE POSTMARKED BY MARCH 14, 2025
OR DROPPED OFF AT KCSOS OFFICE, 1300 17TH ST, 6th FLOOR**