

Colorado Family, Career and Community Leaders of America

2017 Leadership Scholarship

The Leadership Scholarship will be awarded to one outstanding graduating senior who has been an officer at any level of the Colorado FCCLA organization.

Evaluative Criteria

Evaluation will be based on the following components (100 pts.):

- | | |
|--|-----------|
| 1. Candidate Application | 5 Points |
| 2. FACS/ FCCLA Experience Paragraph | 20 Points |
| 3. FCCLA Impact Paragraph | 20 Points |
| 4. Resume | 20 Points |
| 5. Three (3) letters of support (40 points each) | 30 Points |
| 6. Academic Transcript | 5 Points |

Application Material

1. Complete the Candidate Application.
2. One paragraph explaining how applicant has applied Family and Consumer Sciences knowledge and FCCLA experiences to life at home, at school, in the community, and/or on the job. List all Family and Consumer Sciences course taken.
3. One paragraph on "Impact FCCLA Leadership Experiences May Have in My Future." (Include career goals and how these relate directly to leadership experiences in FCCLA.)
4. Resume (up to 2 page maximum) that must include, but is not limited to, the following:
 - a. FCCLA offices/leadership positions (need to have held at least one leadership position in FCCLA at the local, district, state, and/or national level)
 - b. FCCLA committee work
 - c. Number of years of active FCCLA membership
 - d. Participation in school, community, and chapter projects
 - e. Participation in district/state/national level of FCCLA meetings and activities
 - f. Extracurricular activities
 - g. Honors and awards
5. Three letters of recommendation, one from each category:
 - a. FCCLA adviser (required)
 - b. Teacher other than FCCLA adviser, secondary school administrator or counselor
 - c. Community member (such as employer, advisory board member, etc.)
6. Academic achievement (official transcripts), considered a predictor of success in post-secondary program (2.5 minimum GPA)
7. Copy of affiliation form showing proof of membership
8. Do not include additional support evidence or divider pages in the scholarship entry

Submission Process

Application Material must be presented in notebook or portfolio format and must be received by the **state office by March 1, 2017**. Send completed entry to:

Colorado FCCLA
Leadership Scholarship Committee
9101 East Lowry Blvd.
Denver, CO 80230-6011



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Recognition

The award will be presented to one individual during the 2017 State Leadership Conference. The recipient of this award will receive a \$1,000 scholarship.

Rules:

1. Applicant must meet the following eligibility requirements:
 - a. Graduating senior member in good standing
 - b. Minimum G.P.A. of 2.5
 - c. Must have held an FCCLA office in the organization (local, district, state, and/or national) in grades 9-12.
2. Scholarship recipient must use the scholarship to pursue a post-secondary program at an accredited college, university, career and technical school, junior college, or community college. The scholarship must be initiated the first quarter/semester of the same year the scholarship is awarded. The scholarship may only be used in the 2017-2018 academic year.
3. All entries become the property of the Colorado FCCLA and will not be returned. The association reserves the right to publish names and quotes from entries of scholarship recipient and any other entries in Colorado Comments, Teen Times, and/or other Family and Consumer Sciences publications.
4. The recipient must show proof of tuition to the FCCLA office or have institution contact the FCCLA office by August 31, 2017 of the year the scholarship is awarded.
5. Proof of tuition can be a copy of tuition receipt or a letter from the registrar's office. After receiving proof of tuition, scholarship monies will be mailed to the post-secondary institution in the recipient's name on September 15, 2017.
6. The recipient must write an article for the Fall Colorado Comments about their future plans.
7. An alternate may be chosen during the initial selection process in the event that the initial recipient is unable to accept the scholarship. The initial recipient must notify the FCCLA State Office on or before August 1, 2017 if unable to accept the scholarship.



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CANDADITE APPLICATION

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED. Please type.

Name of Applicant: _____

Membership Type: _____ Present Grade: _____

Home Address: _____
Street City Zip

Home or Cell Phone #: _____ Email: _____

Parent's Name: _____

Chapter/School: _____ FCCLA District: _____

School Address: _____
Street City Zip

Adviser's Name: _____

What grade did you join FCCLA: _____ Adviser's Cell Phone #: _____

Principal's Name: _____

**Post Secondary
School of Choice**

**Have you applied
for admission?**

**Have you been
accepted?**

1. Name: _____ Yes ___ No ___ Yes ___ No ___

Address: _____

City State Zip

Major: _____

2. Name: _____ Yes ___ No ___ Yes ___ No ___

Address: _____

City State Zip

Major: _____

Signature of Parent/Guardian

Signature of FCCLA Adviser

Signature of Applicant

Date

