

**FBLA-PBL Foundation Scholarship Application**

The FBLA-PBL Foundation is a NON-PROFIT Corporation, incorporated in 1995 and serves middle schools, high schools, technical, community, junior colleges, and universities. The Foundation raises funds to promote quality business/marketing education through various initiatives one of which is scholarships. The scholarships provide opportunities for students to further their career goals and dreams through attending postsecondary programs, participating in career-related activities, and experiencing the positive results of cooperative efforts. The Foundation will award a $1,000 scholarship per district for FBLA students.

**APPLICANT MUST BE A PAID MEMBER (GRADUATING SENIOR) OF ALABAMA FBLA AND MUST ATTEND THE ALABAMA FBLA STATE CONFERENCE**

Please complete and **upload** this application and supporting documents as **ONE** PDF file to the URL below, name the file **District#\_Last Name\_FirstName**:

<https://www.dropbox.com/request/5DXQbksemEmpYJc3UoSt>

**DEADLINE DECEMBER 15**

**Essay portion to be mailed to adviser and completed at home site.**

**FBLA-PBL Foundation**

**Scholarship Application**

**Checklist**

* Scholarship Application is **keyed** (handwritten applications will not be reviewed)
* Applicant’s resume is included
* Statement of grade point average verification on official school letterhead and signed by school counselor or registrar – **DO NOT SEND TRANSCRIPTS**
* Letter(s) of acknowledgement from supervisor relating to community service/work experience enclosed
* Letter(s) of acknowledgement from FBLA adviser relating to FBLA involvement and leadership enclosed
* Document is uploaded as **ONE** PDF file

**NOTE: INCOMPLETE SCHOLARSHIP APPLICATIONS WILL NOT BE REVIEWED.**

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**APPLICATIONS WILL NOT BE ACCEPTED VIA EMAIL OR U.S. MAIL.**

**DISTRICT** (pace an X beside the correct district)

\_\_\_1 \_\_\_2 \_\_\_3 \_\_\_4 \_\_\_5 \_\_\_6

**FBLA-PBL Foundation Scholarship Application**

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Please review the following application guidelines carefully.

* Application must be **keyed** (handwritten applications will not be reviewed).
* Go to [www.alabamafbla.org](http://www.alabamafbla.org) and click on **documents** for an electronic copy of the application.
* Applications must be **complete** to be considered.
* Application must include a statement of grade point average on official school letter head and signed by the school counselor or registrar.
* Applicant must be a **paid** member of Alabama FBLA and a graduating senior.
* Applicant **must attend the Alabama FBLA State Conference.**
* Terms and Conditions Section must be read and signed.
* Application deadline date is **December 15** each year**.**
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* Essay portion will be sent to home school in February for completion.
* Applications and essays will be reviewed in March of each year.
* The winners will be announced at the state FBLA-PBL conference (recipients must attend the state conference).

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***All information must be provided on this form unless otherwise specified.***

# Scholarship Criteria & Weighting

35% FBLA Involvement & Leadership (including FBLA community service)

25% Community Involvement – (other than FBLA)

20% Essay

20% GPA and Honors & Awards other than FBLA-PBL

Direct questions concerning the application or process to Lisa Weeks, FBLA State Adviser at [lweeks@alsde.edu](mailto:lweeks@alsde.edu) or (334) 694-4757, or the above address.

PLEASE KEY THE APPLICATION FORM and KEY AND ATTACH ADDITIONAL REQUIREMENTS TO THE APPLICATION. HANDWRITTEN APPLICATIONS WILL NOT BE ACCEPTED.

**Personal Information**

Applicant’s Name:

School Name:      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant’s Email Address:      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School Mailing Address: Street      P.O.

City:      State:       Zip Code:

Day Telephone (include area code):

Night Telephone (include area code):

FBLA adviser: First       Last

FBLA Adviser’s email address:

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| **Educational Background** |

List all high schools and postsecondary schools attended.

* **Attach a** statement of grade point average on official school letter head and signed by the school counselor or registrar. **(REQUIRED) DO NOT SEND SCHOOL TRANSCRIPT.**

|  |  |  |  |
| --- | --- | --- | --- |
| School Name & Address | Years | Course of Study | Graduation Date |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

List the accredited postsecondary institution name, address, business office phone where you plan to attend or are currently attending, the academic year you will be attending, and a letter of acceptance or registration if you have one.

|  |  |
| --- | --- |
| Institution Information | Academic Year |
|  |  |
|  |  |

**Community Involvement (Do not include FBLA community service.)**

* List below activities relevant to community involvement providing specific examples.
* Attach a letter acknowledging each of these voluntary and/or work-related services from a director or supervisor. (**REQUIRED**)

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| **FBLA-PBL Involvement & Leadership (Including FBLA community service.)** |

* List activities relevant to FBLA-PBL involvement including community service, offices held and/or awards.
* Attach a letter acknowledging this information from an FBLA-PBL adviser or school principal. (**REQUIRED**)

### GPA and Honors/Awards (Other than FBLA-PBL)

* GPA       (official signed statement from counselor/registrar MUST accompany application)
* List honors and awards received other than FBLA-PBL involvement.

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| **Essay (to be completed at home site)** |

Your adviser will receive the essay topic and the procedures for administering the essay portion of the scholarship application in **February**.

**Terms and Conditions:**

In applying for the FBLA-PBL Scholarship, you are acknowledging the following statements are correct:

* I am worthy of receiving scholarship funds based on need and/or merit.
* I am a paid member of Alabama FBLA.
* I will attend the Alabama FBLA State Conference.
* The information that is submitted in this application is complete and correct to the best of my knowledge.
* I understand that providing false information may disqualify me from consideration for the scholarship.
* I understand that this form is only an application and does not guarantee that any scholarship will be granted to me by the FBLA-PBL Foundation.
* I agree to allow my name to be publicized as a recipient of the scholarship.
* My essay can be reproduced, in whole or in part, giving me credit for writing it.
* I understand that the scholarship funds will be disbursed **to the accredited institution** that has accepted me for the academic period I have indicated on this form. In order to receive all the scholarship, I must be enrolled and in good standing at the accredited institution.

Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NOTE: INCOMPLETE SCHOLARSHIP APPLICATIONS WILL NOT BE REVIEWED.**

**I HAVE READ AND REVIEWED THE APPLICATION AND FIND IT TO BE COMPLETE.**

Signature of Adviser: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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