

NCAEOP EOP APPLICATION FORM

GUIDELINES

NOTE: Be sure to read guidelines and application carefully and include all necessary attachments and forms. All nominees submitted to the State scholarship chairman must be on the most current form as approved by the Board of Directors. The forms must be typed. Scholarships may be used for tuition, books and fees. Scholarship funds will be available after May 1 of the year the scholarship is awarded. Expenses incurred prior to the award date will not be reimbursed.

The North Carolina Association of Educational Office Professionals, Inc. awards annual scholarships in the amount of \$9,000+. Total scholarships are awarded by State, District, Local and National in excess of \$50,000 annually. Applications are received on the local level with winners advancing to District, State and National competition. EOP scholarships are awarded on the basis of association participation, character, initiative, academics and financial need.

To qualify, the scholarship applicant must:

- A. Be a citizen of the United States.
- B. Be a graduate of a senior high school or equivalent.
- C. Be actively employed as an office professional in an educational system, organization, or institution in the state of North Carolina.
- D. Have been a member of NCAEOP for the last three (3) consecutive years and must be current paid member of NCAEOP when request is made for scholarship payment.
- E. Hold or have made application for a State Professional Standards Program (PSP) certificate.
- F. Have taken two or more courses in chosen program.
- G. Be planning to further his/her education.
- H. Submit a completed application with the following attachments:
 1. Photograph (See cover sheet for directions);
 2. One-page biographical sketch on "Why I Am Choosing to Further My Education" that includes a statement of financial need;
 3. Up-to-date, official college transcript which includes the applicant's complete academic record;
 4. A letter or statement from the college which states that the applicant is currently enrolled, the date of quarter/semester applicant enrolled or plans to enroll, and the course of study the applicant is pursuing. Enclose a copy from college catalog showing tuition/fees and course requirements of applicant's program.
 5. Three (3) letters of recommendation as outlined below:
 - a) One (1) from the applicant's immediate supervisor which should describe the applicant's activities and leadership record on the job, personal traits, character, initiative, home background and applicant's financial need.
 - b) One (1) from an executive administrator of the employing system, organization or institution.
 - c) One (1) from someone *other than* a member of the sponsoring association or the applicant's family.
 - d) NO other information on the nominee will be accepted.**

Judges will select EOP winners from the applications received from the districts. They shall be awarded as follows:

1. Guy B. Teachey EOP Scholarship - \$500.00
2. Mildred F. Chrisco EOP Scholarship - \$400.00
3. Joanne V. Williams EOP Scholarship - \$400.00

The progression of scholarship awards should be ranked first place to last place with first place winner receiving the most in monetary value and the last place receiving the least in monetary value.

EOP Scholarship Application

Cover Sheet

Use this as your cover sheet. Picture *must* fit one of these boxes. Please glue to the page. Do not use tape.

Picture must be no smaller than 2 1/2' x 3 1/2'' and no larger than 3 1/2 x 5''.

Applicant: _____

District: _____

SCHOLARSHIP ROUTING FORM
EOP APPLICATION
Must Be Typed and Must Be Complete

Local Association Responsibilities (Name and Address Section)

I. Applications with Section I completed should be sent to interested EOP's.
Deadline to be sent back to Local Association: _____
Send to: _____, Local Scholarship Chairman
Address: _____
Name of local scholarship (if applicable): _____
Amount \$ _____
One nominee will be selected by an impartial committee and submitted to the District Association for competition.
May/June - Awards for local student winners should be recognized during graduation or special awards day with pictures in local newspapers.

District Association Responsibilities (Name and Address Section)

II. Applications with Section II completed should be mailed to local presidents
Applications with Section II completed should be mailed to local presidents.
Deadline to be sent back to District Association: _____
Send to: _____, District Scholarship Chairman
Address: _____
Name of district scholarship (if applicable): _____
Amount: \$ _____
One nominee will be selected by an impartial panel of judges and submitted to the State Association for competition by **November Board Meeting**
The District Scholarship recipients shall be recognized during fall District meetings.

State Association Responsibilities (Name and Address Section)

III. By July 15, applications with Section III completed should be mailed to district presidents or given to them at the June board Meeting. Deadline to be sent back to State Association: **November Board Meeting**
Send to: _____
Address: _____
The nominee with the highest points submitted by impartial judges will be submitted for the National scholarship competition. The State scholarship recipients will be recognized at the annual conference in March.

Before distributing EOP applications to interested members. **Local scholarship chairmen** should complete this section

Before mailing forms to the local association, **District Scholarship chairmen** should complete name and address section

Before mailing forms to the district association. **State Scholarship chairmen** should complete name and address section.

Start Here

Local chairman:
Deadline date to be returned to District chairman

Deadline date to be returned to State chairman
November Board Meeting

Winner sent to the National chairman should meet the deadline of **March 15**

NCAEOP EOP APPLICATION FORM
(Continued)
RECOMMENDATION OF SPONSORING LOCAL ASSOCIATION

Do you personally know the applicant? _____ If so, how long? _____ Why do you think the applicant should be considered for the North Carolina Association of Educational Office Professionals, Inc. scholarship award?

Signature of Local Association President

Date

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**RECOMMENDATION OF SPONSORING DISTRICT ASSOCIATION**

Do you personally know the applicant? \_\_\_\_\_ If so, how long? \_\_\_\_\_ Why do you think the applicant should be considered for the North Carolina Association of Educational Office Professionals, Inc. scholarship award?

\_\_\_\_\_  
Signature of District Association President

\_\_\_\_\_  
Date

North Carolina Association of Educational Office Professionals, Inc.

EOP SCHOLARSHIP APPLICATION FORM

The candidate is to complete the application, attach a small photograph, secure the required attachments as listed in the guidelines and return all materials to the sponsoring association by the due date listed on the Routing Form. Must Be Typed.

PERSONAL ANDEDUCATIONAL DATA

Date of Application \_\_\_\_\_

Full Name Mr/Miss/Mrs \_\_\_\_\_

(Last)

(First)

(Middle)

Permanent Address \_\_\_\_\_

Birthday \_\_\_\_/\_\_\_\_/\_\_\_\_ Home Phone # (\_\_\_\_) \_\_\_\_\_ Work Phone # (\_\_\_\_) \_\_\_\_\_

U.S. Citizen YES  NO

Employer \_\_\_\_\_ Dept/Div \_\_\_\_\_ How Long Employed \_\_\_\_\_

Address \_\_\_\_\_ Position \_\_\_\_\_

Email address: \_\_\_\_\_

College You Are Attending/Plan to Attend \_\_\_\_\_ Date of Semester Enrolled/Plan to Enroll \_\_\_\_\_

Course of Study/Career Objective \_\_\_\_\_

\*If more room is required, you may attach one additional sheet to answer all of the questions below. If you use an additional sheet, please type "See Attached" on this application form under the appropriate question.

\*List Church and Community Activities (Include Honors, Awards, and Recognition Received):

ASSOCIATION DATA

Membership (Years): Local \_\_\_\_ District \_\_\_\_ State \_\_\_\_ National \_\_\_\_ PSP Enrollment: State \_\_\_\_ National \_\_\_\_

Current NC Certificate or NC Certificate Working Toward \_\_\_\_\_ Date Received \_\_\_\_\_

If you hold a National PSP Certificate, list type: \_\_\_\_\_ Date Received \_\_\_\_\_

\*Offices, Appointments, and Committees: List on additional sheet in the following order: Local, District, State, and National and include year(s) of service

\*Associational Awards and Recognition Received: List on additional sheet in the following order: Local, District, State, and National and include year(s) of awards/recognition.

Other Pertinent Information:

FINANCIAL ANALYSIS

Applicant's Gross Annual Income \$ \_\_\_\_\_

Husband's/Wife's Gross Annual Income \$ \_\_\_\_\_

Other Family Income (Ex: Social Security, other scholarships, inheritance, etc.\*) \$ \_\_\_\_\_

\*List, if applicable) \_\_\_\_\_ Total Income \$ \_\_\_\_\_

Number Of Dependent Children \_\_\_\_ Are Any Of These Attending College? \_\_\_\_ If Yes, Where? \_\_\_\_\_

Other Dependents (Explain Relationships) \_\_\_\_\_

Anticipated Annual Expenses for Tuition, Books, & Supplies \$ \_\_\_\_\_

I certify the above information to be true and correct.

Signature of Applicant

**North Carolina Association of Educational Office Professionals, Inc.**  
**NCAEOP EOP SCHOLARSHIP APPLICATION FORM (Continued)**  
*This Form Must Be Typed*

**“Why I Am Choosing To Further My Education”**  
**(Include Statement Of Financial Need)**

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**Signature of Applicant**

# To be completed by District President **BEFORE** submitting to State Scholarship Chairman

## EOP Application Checklist

### Have you included:

- \_\_\_\_\_ 1. Completed Application
- \_\_\_\_\_ 2. Photograph
- \_\_\_\_\_ 3. One-page biographical sketch
- \_\_\_\_\_ 4. Up-to-date college transcript
- \_\_\_\_\_ 5. Letter or statement from the college which states the applicant is currently enrolled, the date of quarter/semester applicant enrolled or plans to enroll, course of study the applicant is pursuing.
- \_\_\_\_\_ 6. Copy from college catalog showing tuition/fees and course requirement of applicant's program
- \_\_\_\_\_ 7. Letter of reference from immediate supervisor
- \_\_\_\_\_ 8. Letter of reference from executive administrator
- \_\_\_\_\_ 9. Letter of reference other source
- \_\_\_\_\_ 10. US Citizen
- \_\_\_\_\_ 11. High School Graduate
- \_\_\_\_\_ 12. Submit six (6) copies (1 original and 5 copies)

\_\_\_\_\_  
Signature of District President

**North Carolina Association of Educational Office Professionals, Inc. JUDGES' SCORE SHEET**  
**EOP SCHOLARSHIP APPLICATION FOR \_\_\_\_\_**  
**DISTRICT \_\_\_\_\_**

|                                                    |                                                                |                                                    |
|----------------------------------------------------|----------------------------------------------------------------|----------------------------------------------------|
| <input type="checkbox"/> All Requirements Met      | <input type="checkbox"/> College Enrollment Statement          | <input type="checkbox"/> Letters of Recommendation |
| <input type="checkbox"/> Associational Information | <input type="checkbox"/> Transcripts (Attached to Application) |                                                    |

**I. Association Participation - Up to 35 Points**

**Points Awarded**

|                                                                                                        |               |              |
|--------------------------------------------------------------------------------------------------------|---------------|--------------|
| • State Office and Committee/Appointment Participation<br>(to include awards and honors at each level) | 0 - 15 points | _____        |
| • District Office and Committee/Appointment Participation                                              | 0 - 10 points | _____        |
| • Local Office and Committee/Appointment Participation                                                 | 0 - 5 points  | _____        |
| • National Office and Committee/Appointment Participation                                              | 0 - 5 points  | _____        |
|                                                                                                        | <b>Total</b>  | <b>_____</b> |

**II. Character/Initiative/Academics - Up to 35 Points**  
**(See application, transcripts, narrative)**

**Points Awarded**

|                                                                                |               |              |
|--------------------------------------------------------------------------------|---------------|--------------|
| • Academic Initiative<br>(To include grades, family challenges, program, etc.) | 0 - 10 points | _____        |
| • Civic, Community, and Church Activities                                      | 0 - 10 points | _____        |
| • Character (Based on letters of recommendation and narrative)                 | 0 - 10 points | _____        |
| • Recognition/Awards Received                                                  | 0 - 5 points  | _____        |
|                                                                                | <b>Total</b>  | <b>_____</b> |

**III. Financial Need - Up to 30 Points**

**Points Awarded**

|                                                                            |               |              |
|----------------------------------------------------------------------------|---------------|--------------|
| • Combined Family Annual Income                                            | 0 - 10 points | _____        |
| • Expected Annual Educational Expenses                                     | 0 - 10 points | _____        |
| • Number of Dependents/Number in College                                   | 0 - 5 points  | _____        |
| • Other Factors (See financial data, narrative, letters of recommendation) | 0 - 5 points  | _____        |
|                                                                            | <b>Total</b>  | <b>_____</b> |

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**Total Points Awarded**      **=====**

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*Signature of Judge*