



## North Carolina FCCLA FACS Teacher Scholarship

This scholarship is offered annually to encourage outstanding affiliated NC FCCLA members to pursue a degree in FACS Education. One \$500 scholarship will be awarded annually. Each recipient will be eligible for up to a total of \$2000 over a four-year period. The student must maintain a 2.0 GPA to keep the scholarship for the four-year period.

WHO IS ELIGIBLE TO APPLY	HOW ARE WINNERS SELECTED	COMMITTEE MEMBERS FOR SELECTION
<ul style="list-style-type: none"> <li>• Current Affiliated NC FCCLA Member for the current year</li> </ul>	<ul style="list-style-type: none"> <li>• Characteristics deemed relative to success in teaching FACS</li> </ul>	<ul style="list-style-type: none"> <li>• A committee of FACS advisers</li> </ul>
<ul style="list-style-type: none"> <li>• Be a resident of North Carolina</li> </ul>	<ul style="list-style-type: none"> <li>• SAT Scores</li> </ul>	<ul style="list-style-type: none"> <li>• One Teacher Educator</li> </ul>
<ul style="list-style-type: none"> <li>• Be a senior attending a NC High School</li> </ul>	<ul style="list-style-type: none"> <li>• Outstanding qualities of leadership in school and community life</li> </ul>	<ul style="list-style-type: none"> <li>• Three other educators/administrators</li> </ul>
<ul style="list-style-type: none"> <li>• Meet entrance requirements of a NC college or university which offers a degree in FACS</li> </ul>	<ul style="list-style-type: none"> <li>• Scholastic achievement</li> </ul>	<ul style="list-style-type: none"> <li>• NC FCCLA State Adviser</li> </ul>
<ul style="list-style-type: none"> <li>• Enroll in college or university in the Fall following the receipt of the scholarship</li> </ul>		
<ul style="list-style-type: none"> <li>• Major in FACS</li> </ul>		



## NC FCCLA FACS TEACHER APPLICATION

**INSTRUCTIONS:** Complete the following application and return it six weeks prior to the NC FCCLA State Leadership Meeting. The application forwarded to the NC FCCLA State Adviser postmarked by February 1<sup>st</sup>. Information must be printed or keyed into the space provided. **DO NOT** write on back or add any additional pages.

**SEND WITH APPLICATION:**

- 1 official copy of high school transcript
- 3 letters of recommendation (FCCLA Chapter Adviser, School Administrator or teacher, one other individual from the community, not a relative)
- 1 two-page typewritten theme: “The role of FCCLA in my life”
- 1 one-page typewritten theme: “Why I want to teach FACS”

**PLEASE TYPE:**

Full Name of Applicant: \_\_\_\_\_

Name of High School: \_\_\_\_\_

School Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_

Name of Parents/Guardians: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Date of Graduation: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Number or Years in FACS Classes: \_\_\_\_ Number of years as an affiliated FCCLA Member \_\_\_\_\_

Name of college/university the applicant plans to attend: \_\_\_\_\_

LIST FCCLA ACTIVITIES:	
YEAR:	ACTIVITY:

<b>LIST FCCLA OFFICES YOU HAVE HELD:</b>	
<b>YEAR:</b>	<b>OFFICE:</b>

<b>FCCLA AWARDS OR SPECIAL ACCOMPLISHMENTS:</b>	
<b>YEAR:</b>	<b>AWARD/ACCOMPLISHMENT:</b>

<b>OTHER SCHOOL ACTIVITIES, OFFICES HELD OR AWARDS:</b>	
<b>YEAR:</b>	<b>ACTIVITY:</b>

<b>LIST COMMUNITY ACTIVITIES:</b>	
<b>YEAR:</b>	<b>ACTIVITY:</b>

LIST EMPLOYMENT:	
EMPLOYMENT/DATES:	POSITION:

LIST ACADEMIC INFORMATION:	
CLASS RANK/CLASS SIZE:	NON-WEIGHTED GPA:
SAT (VERBAL)	SAT (MATH)

**STATEMENT GOT FCCLA ADVISER/SCHOOL COUNSELOR**

I have examined this application and the information and find that the records and information are true, complete and accurate.

\_\_\_\_\_

(FCCLA Adviser)                      (Date)                      (School Counselor)                      (Date )

**STATEMENT FOR PARENT/GUARDIAN**

I certify that:

- The information provided is true, complete, and accurate