



Family & Consumer Science Educators of Michigan

Michigan FCCLA Scholarship

DEADLINE: February 24, 2017

Each year, Family and Consumer Science Educators of Michigan (FCSEM) assists one FCCLA high school student reach their post secondary goals by providing a \$1,000 scholarship towards college education.

One student will be the deserving recipient of this scholarship and will be acknowledged during the 2017 FCCLA State Conference in March and the FCSEM annual conference on July 31 - August 1, 2017.

The application must be **received by the scholarship committee no later than February 24, 2017.**

The scholarship application **MUST BE TYPED.**

Send completed scholarship applications to:

Nicole Dykstra
3484 Autumnwood Drive
Hamilton, MI 49419

ndykstra@alleganps.org

If you have any questions, feel free to contact Nicole or the Michigan FCCLA Office at 734-487-8657.

Family & Consumer Science Educators of Michigan
and
Michigan Association of Family, Career & Community Leaders of America

Scholarship Application

Form A: To be completed by the applicant

Deadline: February 24, 2017

THIS FORM MUST BE TYPED

Name of Applicant: _____

Home/Permanent Address: _____

Home Phone: _____ School Phone: _____

High School: _____
Name, City, County

Number of years in FCCLA: _____ School(s): _____

List FCCLA Activities during your high school years (grades 9-12).

Chapter Level:

State Level:

National Level:

List your FCCLA leadership involvement. Include the number of years in each.

Chapter:

State:

National:

List any FCCLA Awards you have received, and the year you received them.

(attach an additional page if necessary).

List participation in extracurricular and other activities (church, 4-H, etc.) while in high school.

Attach an additional page if necessary. Please note any leadership and volunteer positions held in the above groups).

ESSAY: How has FCCLA contributed to your growth and development, and influenced your decision to attend college?

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Scholarship Application

Form B: To be completed by the applicant's FCCLA Adviser

Deadline: February 24, 2017

THIS FORM MUST BE TYPED

Name of Applicant: _____

Name of Adviser: _____

Describe this member's contributions and leadership to the chapter and state programs.
(Attach additional pages if necessary.) Please sign below.

Signature of Chapter Adviser

Date

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Scholarship Application

Form C: To be completed by the applicant's high school or career technical center Principal or Counselor

Deadline: February 24, 2017 **THIS FORM MUST BE TYPED**

Name of Applicant: _____

Number of students in applicant's class: _____

Grade Point Average (indicate basis, i.e. 4.0, 100%, etc.) _____

Academic rank in class from the top: _____

Rank the applicant as (1) Excellent; (2) Above Average; (3) Average; (4) Below Average; or (5) Poor in the following traits:

Attitude: _____ Raw Intelligence: _____ Work Performance: _____ Teamwork: _____

Willingness to help others: _____

Other comments regarding the applicant's qualifications:

For FCSEM Use Only:

Name of Evaluator: _____

Title: _____ School: _____

Address: _____ City: _____, Michigan Zip _____

Signature of Evaluator: _____