**NAFEPA SCHOLARSHIP APPLICATION, 2024**

**Application Checklist and Cover Sheet**

A **completed Scholarship Application Packet** includes ALL the following documents and ALL required signatures and initials.

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|  | **Completed Scholarship Application Form,** including this Checklist and all four parts; | | |
|  | |  | **Application Checklist,** with applicant’s signature and date |
|  | |  | **Part 1**: Applicant’s Information |
|  | |  | **Part 2**: List of School, Community, Service, Leadership, and Work Activities/Experiences |
|  | |  | **Part 3**: Certification of Applicant’s High School Completion Status by high school principal |
|  | |  | **Part 4:** Photo Option and Permission |
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|  | **Spring 2023 High School transcript - include a unweighted GPA, if possible** | | |
|  |  | | |
|  | **Three letters of recommendation:** | | |
|  | 1. One from the applicant’s HS principal or administrative designee (on school letterhead) 2. One from a faculty member or advisor (on school/district letterhead) 3. One from a non-family member | | |
|  | **Personal Essay up to 2 pages, double spaced.** Address each of the following prompts.  Do not include your name or the name of your school or district anywhere in/on the essay. | | |
|  | 1. Explain your reasons for applying for the scholarship; 2. Describe a time when you faced adversity and the impact of the experience on you; 3. Describe a time when you demonstrated leadership skills or qualities; identify at least one of the skills/qualities and describe the impact of the experience on you or others; 4. Describe a time when you demonstrated personal responsibility and the impact of the experience on you or others; AND 5. Discuss your future goals and why they are important. | | |

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|  | **Use the Application Checklist with the Applicant’s Signature as a Cover Sheet.** |

**Applicant - Read and verify each statement by putting your initials in the green boxes.**

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| --- | --- |
|  | I understand that to be eligible for the NAFEPA Scholarship Program, I must be enrolled in a public school district or charter school with at least one current NAFEPA member. |
|  | I verify that none of the components of this application were generated or influenced by Artificial Intelligence (AI). |

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| --- | --- | --- | --- |
| **Applicant’s Signature:** |  | Date: |  |

**PLACE AN “X” IN EACH BOX TO MARK AS COMPLETED.**