OKLAHOMA EXTENSION ASSOCIATION OF FAMILY AND CONSUMER SCIENCES

**OEAFCS SCHOLARSHIP**

APPLICATION FORM

**Eligibility**

Applicant must be a current member of the Oklahoma Extension Association of Family and Consumer Sciences for the year they are receiving the award. Scholarship must be used professional improvement.

**Procedure**

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ZIP\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

County/Position \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Years in OCES \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Program you work with \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Present Degree\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you working toward a degree?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please provide the following:

1. How would you like to use this scholarship? (Please include when, where and course to be taken)
2. Explain how this study will fit into your professional improvement plan.
3. Tell how this would improve your ability to perform as an Extension worker and how you anticipate using the information gained in your county?
4. Are you receiving other scholarships? Please list.
5. Narrative Statement: Explanation of outstanding program in your county (not to exceed 50 words) such as: Objective, Audience Reached, Subject Taught, Explanation of Event, People Involved and Publicity used. Tell whether this is a specific event or a continuing program.