

# **Association of California School Administrators Region 6 Dr. Frank Wells Memorial Scholarship 2025-2026**

The Association of California School Administrators Region 6 is awarding a \$2,000 scholarship to a Black/ African American graduating high school senior who exemplifies Dr. Frank Wells' deep commitment to equity and justice and his compassion and care for all people. Dr. Wells passed away suddenly on March 11, 2024. During a career spanning over 30 years in public education, Dr. Wells served as a teacher, principal, director, assistant superintendent, superintendent, an elected school board member, as well as school board president. He was a fierce advocate for all students, particularly students of color. Dr. Wells promoted professional growth by leading with action. He revitalized the ACSA, North Alameda County Charter Chapter, Region 6, by reestablishing and serving as president from 2022-2024. He was also serving as the California Association of African American School Superintendents and Administrators (CAAASSA) President-Elect and had recently been awarded the CAAASSA Marcus Foster Distinguished Educator Award at the time of his passing. ACSA Region 6 is deeply indebted to Dr. Wells for his leadership and advocacy.

## **QUALIFICATION CRITERIA**

The award is based on records of success in academics, scholarship, citizenship as well as activities focused on service to others.

### **The applicant must:**

1. Be a Black/ African American high school graduating senior.
2. Plan to attend a college, university or community college in the Fall of 2026 as a full-time student.
3. Complete all requirements of the attached application. The written application must be done by the applicant.
4. Letter of Recommendation from a teacher, Principal or Counselor is required. Letter must be dated after October 1, 2025.
5. If selected, successful applicants must submit a W-9 form for ACSA tax reporting requirement.
6. **Application must be submitted as one single scanned PDF to the application committee.** (no photos or multiple PDFs will be accepted).

The completed application must be emailed to Rose Lock, Region 6 Executive at [rlock@acsa.org](mailto:rlock@acsa.org) by 5:00 PM on March 13, 2026. Incomplete or late applications will not be accepted for consideration.

## ACSA Region 6 Dr. Frank Wells' Memorial Scholarship Application

### *Applicant Information*

Student Applicant's Name: \_\_\_\_\_

Student Applicant's address: \_\_\_\_\_

City: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Student Applicant's Cell Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Expected Graduation Date: \_\_\_\_\_

High School and District: \_\_\_\_\_

High School Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Higher education institution you hope/plan to attend in the fall: \_\_\_\_\_

Have you been officially accepted? \_\_\_\_\_

### *Parent/Guardian Information*

Name of Parent/Guardian: \_\_\_\_\_

Parent/Guardian's Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Relationship to Student Applicant: \_\_\_\_\_

**Written Application (Complete by applicant)**

Answer each question below. All six questions must be addressed succinctly and completely. Answers to questions must be explicit and written as a narrative. Provide “evidence” when answering each question (give specific examples). Use not more than 125 words to answer each question. Please type your responses. Readability counts.

1. What are your career plans and goals for the future and how will this award help you achieve those goals?
2. In what type and variety of student activities have you participated? What awards have you received and/or offices have you held? (clubs, sports, music, drama, leadership, academics, etc.)
3. Describe a way that you have contributed to the success of the Black/ African American students in your community.

4. Describe a time when you overcame a challenge or hardship in your life.
5. How do you view your role as a world citizen who can help make this a better world?
6. Please tell us anything else about yourself that you would like to have considered in the assessment of this application.

## **Transcript Information (Complete by school official)**

*Student must include a high school transcript and have the following section completed by the appropriate school official.*

Cumulative grade point average: \_\_\_\_\_ I certify this data is from a current and official transcript.

School Official's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_

School Official's Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

## **Certification**

All of the information on this form is true and complete to the best of our knowledge. We agree to give proof of the information we have given on this application. We realize that if we do not give proof when asked, the student will not be considered for a scholarship.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

School Administrator Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_.

Email \_\_\_\_\_

**\*\*In accepting this scholarship, you must provide verification of attendance at a higher education institution for fall 2026. Please email evidence of full-time enrollment in a college, university, or junior college for fall 2026 to Region 6 Executive Director at [rlock@acsa.org](mailto:rlock@acsa.org) by September 30, 2026.**

## **WAIVER**

I hereby allow the name, school, district, grade, narrative of success attached to this nomination and images of this student to be used by ACSA for recognition and publicity purposes. This may include sharing with the news media, through ACSA's websites and publications, and through social media channels, including LinkedIn, Facebook, and Instagram.

Name: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_ Date: \_\_\_\_\_