

Association of California School Administrators Region 6 Bob Blackburn Student Scholarship Program 2026-2027

The Association of California School Administrators Region 6 is awarding \$1500 scholarships to graduating high school seniors who are children of ACSA members in Region 6.

QUALIFICATION CRITERIA

The award is based on records of success in academics, scholarship, citizenship, activities, and the potential for success in higher education as revealed in the application documents.

The applicant must:

1. Be a high school graduating senior.
2. Have a parent or guardian who is a State ACSA and Region 6 member
3. Plan to attend a college, university, or community college in the Fall of 2027 as a full- time student.
4. Complete all requirements of the attached application below. The application must be completed by the applicant and must be signed by a parent or guardian.
5. Include a Letter of Recommendation from a teacher, principal or counselor. The letter must be dated after October 1, 2026.
6. Complete all parts of the application and submit all parts at the same time to the following Google Folder Link: <https://tinyurl.com/4uky7r77>. All documents must contain the applicant's name in the document title.

The completed application must be uploaded to the Google Folder Link by 5:00 PM on March 12, 2027. Incomplete or late applications will not be accepted for consideration.

APPLICANT INFORMATION

Student Applicant's Name _____

Student's Birthdate _____

Student Applicant's address _____

City, State _____ Zip Code _____

Student Applicant's Cell Phone # _____

Student Applicant's Email _____

Expected Graduation Date _____

High School and District _____

Higher education institution you hope/plan to attend in the fall _____

Have you officially been accepted? Yes _____ No _____

PARENT/GUARDIAN INFORMATION (Parent/Guardian must be a current ACSA member)

Name of Parent/Guardian _____

Parent/Guardian's Cell Phone # _____

Parent/Guardian Email: _____

Work Location/District _____

Position _____

ACSA Region 6 Charter _____

Relationship to Student Applicant _____

WRITTEN APPLICATION (Completed by applicant)

Answer each question below. All six questions must be addressed succinctly and completely. If any question does not have a response the application will be considered incomplete and ineligible. Answers to questions must be explicit and written as a narrative. Provide evidence when answering each question (give specific examples). Please type your responses and use proper spelling and grammar. Answers should be between 100-150 words. This will provide enough information to rate your response.

- 1. What are your career plans and goals for the future and how will this award help you achieve those goals? Please be specific and speak to your interests and expectations.

- 2. What kind of student activities have you participated in? Please provide a variety of activities including volunteer opportunities and leadership roles (clubs, sports, music, drama, leadership, academics, etc.). What awards have you received and/or offices have you held?

- 3. Describe an achievement of which you are especially proud. Provide a specific example and the steps you took to achieve this goal. Consider how this achievement might have supported your future goals.

4. Describe a time when you overcame a challenge or hardship in your life. Please provide a specific example and what you did to achieve this.

5. How do you view your role as a responsible citizen in your community? What would you like to contribute to make your community a better place?

6. Please tell us anything else about yourself that you would like to have considered in the assessment of this application. (This question is required).

TRANSCRIPT INFORMATION (Completed by school official)

Student must include a high school transcript and have the following section completed by the appropriate school official. **Student transcript must be submitted together with the application or the application will be considered incomplete and ineligible.**

I certify this data is from a current and official transcript.

School Official's Signature: _____

Date: _____

Title: _____

High School Name: _____

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 provided on this application if requested. We understand that if we do not give proof when requested, the student will not be awarded a scholarship.

Name of Applicant: _____

Signature of Applicant: _____

Date: _____

Name of Parent/Guardian: _____

Signature of Parent/Guardian: _____

Date: _____

****In accepting this scholarship, you must provide verification of attendance at a higher education institution for Fall 2027. Please email evidence of full-time enrollment in a college, university, or junior college for Fall 2027 to ACSA Region 6 Executive Director, Rose Lock, at rlock@acsa.org by September 30, 2027.**

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.

Student Name: _____

Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Relationship to Student: _____

Date: _____