

Association of California School Administrators Region 6 Bob Blackburn Student Scholarship Program 2024-2025

The Association of California School Administrators Region 6 is awarding \$2000 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 2025 as a full-time student.
4. Complete all requirements of the attached application. The written application must be done by the applicant.
5. Letter of Recommendation from a teacher, Principal or Counselor is required. Letter must be dated after October 1, 2024.

The completed application must be emailed to Rose Lock, Region 6 Executive at roselockR6@gmail.com by 5:00 PM on February 14, 2025. Incomplete or late applications will not be accepted for consideration.

ACSA Region 6 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

(Parent/Guardian must be a current ACSA member)

Name of Parent/Guardian _____

Parent/Guardian's Cell Phone # _____ Email: _____

Work Location/District _____

Position _____

Region 6 Charter _____

Relationship to Student Applicant _____

4. Describe a time when you overcame a challenge or hardship in your life.

5. How do you view your role as a responsible citizen of the 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 the appropriate school official.

Applicant ranks _____ in a class of _____ 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: _____

****In accepting this scholarship, you must provide verification of attendance at a higher education institution for fall 2025. Please email evidence of full-time enrollment in a college, university, or junior college for fall 2025 to Region 6 Executive Director at roselockR6@gmail.com by September 30, 2025.**

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, Instagram and X.

Name: _____ Relationship to Student: _____ Date: _____