**Northwest Missouri School Counselor Association**

**MSCA Fall Conference Scholarship**

Established 2013

The Northwest Missouri School Counselor Association (NWMSCA) MSCA Fall Conference Scholarship will be awarded to a full time school counselor. NWMSCA seeks to assist counselors in their professional development goals by providing financial assistance to a full time school counselor so that they may attend the MSCA Fall Conference, the largest source of professional development available to school counselors in Missouri. In doing so, NWMSCA will award one $100 scholarship in the fall of each year. This scholarship is funded by the NWMSCA membership and the number of scholarships awarded is subject to change and based on availability of funds. All applicants must be employed by a school district in the geographic area served by the NWMSCA. Preference will be given to counselors who have not attended the MSCA fall conference.

**REQUIREMENTS**

1. Complete the scholarship **Application Form** and submit/mail it to the NWMSCA Governing Board’s Scholarship Chairperson on or before the September 25th mailing postmark deadline. Incomplete or late applications will not be accepted.
2. Must be employed as a full time school counselor.
3. Provide a statement explaining your desire to attend the MSCA Fall conference and what the applicant hopes to attain from attending.

**AWARDS**

An award of $100 will be announced at the NWMSCA Fall meeting. It is to be applied to the early bird registration for the MSCA Fall Conference.

Recipients may choose to receive a check made payable to MSCA to be submitted along with their early bird registration or be reimbursed by NWMSCA with proof of MSCA early bird registration.

Funding will be provided by the Northwest Missouri School Counselor Association and may also include donation/memorial money designated toward this scholarship.

**2016 APPLICATION FORM**

**Northwest Missouri School Counselor Association**

**MSCA Fall Conference Scholarship**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (First) (Middle) (Last)

Home Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Street) (City) (State) (Zip)

E-mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Newspaper & Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of years employed as a full time school counselor, including the current school year:

\_\_\_\_\_ 0-1 \_\_\_\_\_\_ 2 \_\_\_\_\_\_\_ 3 \_\_\_\_\_\_\_ 4 \_\_\_\_\_\_\_ 5

List all schools you have been employed with starting with the most recent:

\*\*Name of School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Street) (City) (State) (Zip)

Work Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*\*Name of School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Street) (City) (State) (Zip)

Work Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*\*Name of School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Street) (City) (State) (Zip)

Work Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of years you have been a member of NWMSCA:

\_\_\_\_\_ 0-1 \_\_\_\_\_\_ 2 \_\_\_\_\_\_\_ 3 \_\_\_\_\_\_\_ 4 \_\_\_\_\_\_\_ 5

Number of years you have been a member of MSCA:

\_\_\_\_\_ 0-1 \_\_\_\_\_\_ 2 \_\_\_\_\_\_\_ 3 \_\_\_\_\_\_\_ 4 \_\_\_\_\_\_\_ 5

Number of years you have attended the MSCA Fall Conference:

\_\_\_\_\_ 0-1 \_\_\_\_\_\_ 2 \_\_\_\_\_\_\_ 3 \_\_\_\_\_\_\_ 4 \_\_\_\_\_\_\_ 5

Why do you want to attend the MSCA Fall Conference?

Explain your financial need including district contribution to conference fees.

I have reviewed this Application Form and to the best of my knowledge, I believe all of this information is correct. I understand that NWMSCA is not responsible for the remainder of the MSCA Fall Conference registration fee or any other expenses incurred as part of the MSCA Fall Conference.

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(Signature) (Date)

The postmark deadline to be considered for this $100 award is September 25 or earlier. After the winner is notified, this award is to be used for the MSCA Fall conference and is non-renewable.

Mail to: Lorraine Bowers, NWMSCA Scholarship Co-Chair

 Spring Garden Middle School

 5802 S. 22nd

 St. Joseph, MO 64504

 Phone: 816-671-4380 Fax: 816-671-4489

 Email: lorraine.bowers@sjsd.k12.mo.us