

Nebraska Auctioneers Scholarship INFORMATION & CHECKLIST SHEET

Be sure to use forms included in the packet and that all forms are complete. Please use this checklist when returning your scholarship packet. Return the application information packet via **certified mail** to Kelly Augustin **POSTMARKED BY Monday, March 1, 2021**. Please email Kelly at kelly@ruhterauction.com to let her know your scholarship application has been sent.

Winners will be notified by April 10, 2021.

- _____ 1) Application Information Page. *
- _____ 2) Brief statement regarding your educational plans and career aspirations. *
- _____ 3) Highlight school activities, awards, talents, community involvement and employment. *
- _____ 4) Three recommendation sheets. *

They should be from:

- A Teacher
- A Member of your Church or Community
- An Employer (past or present). If you have never been employed, the 3rd recommendation should be filled out by a teacher or a member of your community.

- _____ 5) A grade transcript.

* Indicates pages included in packet.

Forms can be found on the NeAA website at: https://www.nebraskaauctioneers.com/wp-content/uploads/2021/02/2021_auxiliary_scholarship-form-4-3.pdf

CONTACT:
Kelly Augustin
13750 W 70th
Juniata NE 68955
kelly@ruhterauction.com



Scholarship Application Information Page

Name of Applicant: _____

Address: _____

Telephone Number: _____ Email: _____

Date of Birth: _____

Father's Name: _____ Occupation: _____

Mother's Name: _____ Occupation: _____

Relationship to Nebraska Association Auctioneer: _____

Name of Association Member you are related to: _____

College of your choice: _____

Have you applied? Yes or No Have you been accepted? Yes or No

Area of Interest: _____

How many years of Education/Training will your area require? _____

Cumulative Grade Point Average on a 4.0 Scale? _____

Class Rank: _____ of _____ **PLEASE INCLUDE GRADE TRANSCRIPT**

Are you currently employed? Yes or No

If yes, Name of Employer: _____

Please list 3 persons providing recommendations: (use forms in packet)

Name, Address, Phone Number

1. _____

2. _____

3. _____

****These recommendations should include:** A teacher, a member of your church or community and an employer (past or present). If you have never been employed, the 3rd recommendation form should be filled out by either a teacher or a member of your community.

Signature: _____ Date: _____

Parent Signature: _____ Date: _____

Parent Contact Info: _____

Phone: _____ Email: _____

Scholarship Application Recommendation Form (1)

To the person making the recommendation. Please fill out and return to the applicant. Thank you for taking the time to make this recommendation!

Your Name: _____ Applicant's Name: _____

How long have you known the applicant? _____

In what capacity? _____

Please mark the response that you feel most closely reflects the applicant in the following areas. Space is provided for comments. If you need additional space, please use the back of this form.

The applicant's ability to show concern for others:

____ extremely strong ____ very strong ____ moderate ____ poor

The quality of the applicant's commitment to school, community and/or work:

____ extremely strong ____ very strong ____ moderate ____ poor

The applicant's demonstration of initiative in activities or tasks:

____ extremely strong ____ very strong ____ moderate ____ poor

The applicant's ability to follow-through in activities or tasks:

____ extremely strong ____ very strong ____ moderate ____ poor

The applicant's ability and foresight in making decisions:

____ extremely strong ____ very strong ____ moderate ____ poor

The applicant's character and integrity:

____ extremely strong ____ very strong ____ moderate ____ poor

The applicant's reliability and stability:

____ extremely strong ____ very strong ____ moderate ____ poor

The applicant's leadership skills in providing directions and guidance to others:

____ extremely strong ____ very strong ____ moderate ____ poor

Comments: _____

Signature: _____ Title: _____

Address: _____ Ph: _____

Scholarship Application Recommendation Form (2)

To the person making the recommendation. Please fill out and return to the applicant. Thank you for taking the time to make this recommendation!

Your Name: _____ Applicant's Name: _____

How long have you known the applicant? _____

In what capacity? _____

Please mark the response that you feel most closely reflects the applicant in the following areas. Space is provided for comments. If you need additional space, please use the back of this form.

The applicant's ability to show concern for others:

_____ extremely strong _____ very strong _____ moderate _____ poor

The quality of the applicant's commitment to school, community and/or work:

_____ extremely strong _____ very strong _____ moderate _____ poor

The applicant's demonstration of initiative in activities or tasks:

_____ extremely strong _____ very strong _____ moderate _____ poor

The applicant's ability to follow-through in activities or tasks:

_____ extremely strong _____ very strong _____ moderate _____ poor

The applicant's ability and foresight in making decisions:

_____ extremely strong _____ very strong _____ moderate _____ poor

The applicant's character and integrity:

_____ extremely strong _____ very strong _____ moderate _____ poor

The applicant's reliability and stability:

_____ extremely strong _____ very strong _____ moderate _____ poor

The applicant's leadership skills in providing directions and guidance to others:

_____ extremely strong _____ very strong _____ moderate _____ poor

Comments: _____

Signature: _____ Title: _____

Address: _____ Ph: _____

Scholarship Application Recommendation Form (3)

To the person making the recommendation. Please fill out and return to the applicant. Thank you for taking the time to make this recommendation!

Your Name: _____ Applicant's Name: _____

How long have you known the applicant? _____

In what capacity? _____

Please mark the response that you feel most closely reflects the applicant in the following areas. Space is provided for comments. If you need additional space, please use the back of this form.

The applicant's ability to show concern for others:

____ extremely strong ____ very strong ____ moderate ____ poor

The quality of the applicant's commitment to school, community and/or work:

____ extremely strong ____ very strong ____ moderate ____ poor

The applicant's demonstration of initiative in activities or tasks:

____ extremely strong ____ very strong ____ moderate ____ poor

The applicant's ability to follow-through in activities or tasks:

____ extremely strong ____ very strong ____ moderate ____ poor

The applicant's ability and foresight in making decisions:

____ extremely strong ____ very strong ____ moderate ____ poor

The applicant's character and integrity:

____ extremely strong ____ very strong ____ moderate ____ poor

The applicant's reliability and stability:

____ extremely strong ____ very strong ____ moderate ____ poor

The applicant's leadership skills in providing directions and guidance to others:

____ extremely strong ____ very strong ____ moderate ____ poor

Comments: _____

Signature: _____ Title: _____

Address: _____ Ph: _____