# 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. Send the application information packet to Becky Kliewer **POSTMARKED BY Friday, March 1, 2024.** Please email Becky Kliewer at <a href="mailto:beccanikki2000@yahoo.com">beccanikki2000@yahoo.com</a> to let her know your scholarship application has been sent. If you are sending scholarship application electronically, please let Becky know that, too.

W	inners	will b	oe noti	fied by	y April	5, 2024.
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 _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) One recommendation sheet. *
It could be from:
<ul> <li>A Teacher</li> <li>A Member of your Church or Community</li> <li>An Employer (past or present). If you have never been employed, the recommendation should be filled out by a teacher or a member of your community.</li> </ul>
 _5) A grade transcript.

Forms can be found on the NeAA website at: <a href="https://www.nebraskaauctioneers.com/members-portal/forms-applications/">https://www.nebraskaauctioneers.com/members-portal/forms-applications/</a>

### **CONTACT:**

Becky Kliewer 1002 A St Aurora NE 68818 beccanikki2000@yahoo.com



<sup>\*</sup> Indicates pages included in packet.

## **Scholarship Application Information Page**

Name of Applicant:		
Telephone Number:	:	Email:
Date of Birth:		
Father's Name:		Occupation:
Mother's Name:		Occupation:
Relationship to Neb	oraska Association	Auctioneer:
Name of Association	n Member you are	related to:
College of your cho	ice:	
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 I	Point Average on a	4.0 Scale?
Class Rank:	_ofPLE	ASE INCLUDE GRADE TRANSCRIPT
Are you currently e	mployed? Yes or N	[o
If yes, Name	e of Employer:	
-		mmendation: (use form in er, email and relationship to
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an employer (past or	r present). If you hav	de: A teacher, a member of your church or community and/or re never been employed, the recommendation form should be per of your community.
Signature:		Date:
Parent Signature:		Date:
Parent Contact Inf	ò:	
Phone:		Email:

# **Educational Plans & Career Aspirations Statement**

School Activities					
	_				
Awards					
Talents					
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Community Involvement				
Employment				
Other				

### **Scholarship Application Recommendation Form**

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 capacit	y?				
	e response that you feel most closely reflects the applicant in the following areas. ed for comments. If you need additional space, please use the back of this form.				
The applicant's	ability to show concern for others:				
	extremely strongpoor				
The quality of	the applicant's commitment to school, community and/or work:				
	extremely strongpoor				
The applicant's	demonstration of initiative in activities or tasks:				
	extremely strongpoor				
The applicant's	ability to follow-through in activities or tasks:				
	extremely strongpoor				
The applicant's	ability and foresight in making decisions:				
	extremely strongpoor				
The applicant's	character and integrity:				
	extremely strongpoor				
The applicant's	reliability and stability:				
	extremely strongpoor				
The applicant's	leadership skills in providing directions and guidance to others:				
	extremely strongpoor				
Comments:					
	Title:				
Address:	Ph:				