

**MISSOURI ASSOCIATION  
FAMILY, CAREER AND COMMUNITY LEADERS OF AMERICA  
Scholarship Application**

**Please check the appropriate box. (Members may apply for one scholarship only.) I am applying for the following scholarship:**

- \$2000 Family and Consumer Sciences Career Cluster Scholarship (four-year degree program)
- \$1000 Family and Consumer Sciences Career Cluster Scholarship (two-year degree program)
- \$2000 Outstanding FCCLA Leadership Scholarship (four-year degree program)
- \$1000 Outstanding FCCLA Leadership Scholarship (two-year degree program)

Name of Applicant (Last, First, Middle) \_\_\_\_\_

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

City, State, Zip \_\_\_\_\_

Email address \_\_\_\_\_

Name of Parent(s) or Guardian(s) \_\_\_\_\_

Address if other than Applicant's \_\_\_\_\_

School Presently Attending \_\_\_\_\_

School Principal and email: \_\_\_\_\_

Chapter Name and Chapter ID Number \_\_\_\_\_

Chapter Adviser and Email \_\_\_\_\_

School Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

School Phone \_\_\_\_\_

**I. Plans of Applicant:**

A. Institution(s) \_\_\_\_\_

B. Major Selected \_\_\_\_\_

C. Check One:     2-year Associate Degree     4-year Bachelor's Degree

D. Using the space provided, please describe your career goals:

II. Membership:       Comprehensive       Occupational

A. Total Number of Years \_\_\_\_\_

B. Current Chapter \_\_\_\_\_

C. Other Chapters \_\_\_\_\_

III. Record of Involvement (list activities only once)

A. FCCLA Participation (Activities and Awards)

Local:

Regional:

State:

National:

B. Please explain how involvement in FCCLA activities has contributed to your personal growth and leadership development:

C. Please explain how involvement in FCCLA activities has impacted your family life, community involvement and career preparation:

D. Activities/Honors (Other than FCCLA)

E. FACS Courses taken

Grades received:

SAMPLE