

PENNSYLVANIA ASSOCIATION OF EDUCATIONAL OFFICE PROFESSIONALS (PAEOP)
HERMINE SOLT STUDENT SCHOLARSHIP GUIDELINES/CRITERIA. - 2024

Instructions:

1. **Complete this form in full**, and **attach additional information listed on page 2**
2. Application must be signed/dated and saved in PDF format
3. Application Email must come from School Counselor, subject line: **PAEOP Scholarship Application**
4. **Email accepted until March 1, 2024 - sent to louisemipaeop@gmail.com**
 - **Entries missing information, required signatures or dated and/or received after the deadline will not be considered completed.**

Personal Information:

Name: _____ Date of Birth: _____
Address: _____ City: _____ (PA) Zip: _____
County: _____ Phone: _____ Email: _____
Number of children in household: _____ Number of siblings CURRENTLY in College _____
Are you anticipating financial assistance from parent/guardian for your education? _____

Academic:

Current High School: _____ Anticipated Graduation Date: _____
Name of HS Counselor: _____ Counselor_email_address: _____
Names of Colleges/Post -Secondary Institutions Applied to
1. _____ Accepted: Yes No
2. _____ Accepted: Yes No
3. _____ Accepted: Yes No
4. _____ Accepted: Yes No

(please use additional pages if needed, attaching them to the application)

Intended Major: (check)

Accounting Business Business Administration Communications
 Business Management Finance International Business Marketing
 Entrepreneurship Computer/Technology Secretarial/Adm Assistant
Other: _____

TO BE COMPLETED BY COUNSELING DEPARTMENT:

GPA: _____ Percentile in Class: _____ Class Rank: _____
Citizenship: 4 – Excellent. 3 – Very Good. 2 – Good. 1 – Fair. 0 – Poor
Financial Need: 4 – Great Need. 3 – Above Average Need. 2 – Average Need. 1 – Some Need.
Comments: (continue on reverse) _____
Counselor Name (print) and Signature: _____

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HERMINE SOLT STUDENT SCHOLARSHIP Addendum Documents - 2024

Instructions:

In order for the committee to review and consider the application for this scholarship, both the student and counselor will provide additional information in essay and list form, as appropriate. This information should be included as additional pages to the front sheet of the application and submitted as a completed PDF.

Additional Student Records/Documents Required:

- **Personal Student Essay** of need and desire regarding consideration of this scholarship, noting the reason for continuing education in the “Intended Major” noted on page 1.
- **List of Extracurricular Activities**, dates of participation, including SchoolClubs, Community service organizations, any leadership offices held and employment held during High School
- **List of Volunteer Activities**, names of organizations, dates and projects completed
- **List of Memberships** (active and past) including dates
- **Transcript Copy** of grades – up to date of submission
- **Recommendation letter** for this applicant from a current teacher – signed and dated

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TO BE COMPLETED BY COUNSELING DEPARTMENT:

Guidance Office Comments: (expand if necessary) _____

Counselor Name (print) and Signature: _____

School District Identification: _____

Date Submitted: _____

Contact Phone Number: _____