



PEAK PARTNER MEMBERSHIP SCHOLARSHIP PROGRAM

The **WASBO Peak Partner Membership Scholarship Program** was established in 2019, to assist individuals with careers in school business gain access to the resources and professional development opportunities available through WASBO membership.

◆ **Peak Partner Sponsored Memberships:**

- Funds are provided by each peak partner - \$500 per region per fiscal year.
- Recipients are able to use this scholarship for an annual membership fee.
- Scholarships awarded shall not exceed \$175 per recipient in a single fiscal year (July 1- June 30).
- Scholarship award priority will go to first time WASBO members and individuals working toward WASBO certifications.
- Applicants who are not first time WASBO members and are not currently working on a WASBO certification are still eligible for a membership scholarship. They must submit a letter from their supervisor to confirm the district's inability to pay the \$175 annual membership fee.

◆ **General Requirements:**

- Each candidate must submit an application (available on the WASBO website). Information about any scholarship will be available from the WASBO office or WASBO website. Membership scholarships may be submitted throughout the year, and awarded memberships will run through the remainder of the current fiscal year (July 1-June 30).
- WASBO reserves the right not to award a membership scholarship in any given year pending quality of the application, availability of funds, etc. Membership scholarships are limited to seventeen (17) memberships per region per fiscal year.

- The WASBO staff will screen and select scholarship awards with the use of a rubric. Applicants will be scored based on their responses to the application questions and their letters of support from their current supervisors (if applicable).
- All scholarships will be remitted directly to WASBO and the new membership will be set up in the recipient's name.
- Scholarships will be awarded without regard to race, creed, color, age, national origin, gender, sexual orientation, marital status, or the presence of any handicap.

APPLICATION FORM

MEMBERSHIP SCHOLARSHIP

Name of Applicant:

Last

First

Middle

Applicant Home Address: _____

Job Title: _____

Employer: _____

Employer Address: _____

Phone Number: Home: () _____

Work: () _____

E-mail Address: _____

First-Time WASBO Member

Current or Prior WASBO Member

I am currently working toward a WASBO certification.

Yes

No

If you selected yes, please select the certification you are working toward:

Certified School Business Specialist (CSBS)

Certified School Business Official (CSBO)

Certified School Business Administrator (CSBA)

1. Explain how this scholarship will assist with your professional development (500 words or less):

2. Please explain and document financial need, other restrictions, etc. (e.g. recent levy failure, district travel restrictions, etc.)

3. Other financial resources available to me are:

4. What are your career goals, and how will this scholarship assist those goals? (500 words or less):

5. Prior/Current WASBO Members Only: Please submit a letter from your supervisor with this application. The letter should state your supervisor's support of your WASBO membership and the district/organization's inability to provide the funding for your annual membership fee.

Signature _____ **Date** _____

Supervisor Signature _____ **Date** _____

Submit completed application to admin@wasbo.org or by mail: 284 Lee St. SW , Ste 132, Tumwater, WA 98501.