

State Reason(s) for Seeking Scholarship

List Professional Preparation: (begin with most current)

Dates	Institution or Location	# Hours or Degree

List Professional Experience: (begin with present position)

Position	Name and Location/School District	Dates

Professional Activities, Awards, and Honors:

Cite professional organizations of which you are a member with year(s) of membership and office(s) held. Also, cite service or professional task forces and other leadership activities. Give name and dates in chronological order or special awards and honors.

Community Service:

Cite membership in civic, social, athletic, humanitarian, philanthropic, or other organizations and leadership roles played. Cite special awards and honors with dates in chronological order.

Evidence of Effective Leadership:

Cite three or four noteworthy accomplishments in your career to show evidence of specific results.

MABSO Participation:

Please describe your participation and activities relating to MASBO.

Future Plans:

What are your future professional plans as they relate to school business activities?

To be completed and returned to:

*MASBO
Attn: Executive Director
P O Box 664
Petal, MS 39465
PH: 601-544-0262*

Or

EM: sheryle.coaker@gmail.com

This application must be completed along with a letter of recommendation and support from the supervisor or superintendent before July 1 of each year.

The Scholarship will be awarded each year on or before August 15.

The scholarship recipient will be required to submit proof of successful completion of the course(s).