

 

**East Tennessee Chapter**

 **Scholarship Application and Guidelines**

The American Association of Blacks in Energy (AABE) is a national association of energy professionals founded and dedicated to ensure African Americans and other people of color have a voice in the discussions and developments of energy policies, regulations, R&D technologies and environmental issues.

The Tennessee Valley Authority is the nation’s largest public power provider, but it’s more than just a utility company. TVA oversees navigation, flood control, and the environmental health of the nation’s fifth-largest river system, all financed by the sale of electric power. Together,

TVA and the East TN Chapter of AABE seek to help increase the number of underrepresented ethnic groups in energy related fields. Providing scholarships is just one way to make a difference toward greater diversity and inclusion in the ranks of our future energy professionals and policymakers.

**Eligibility**

 Candidates for a needs-based AABE scholarship must meet the following eligibility criteria:

* Be in “Good” academic standing (G. P. A. 3.0 or above)
* Plan to major in business, one of the physical sciences, technology, engineering or mathematics fields in preparation for a career in the energy sector.
* Be a member of one of a class or group of individuals who has been historically underrepresented in the sciences, technology, engineering and math related disciplines.
* Be a U.S. citizen

**Selection**

Scholarship recipients are determined by the East TN Chapter scholarship committee. Recipients will receive notification of their selection.

**Awards**

The East TN Chapter of AABE will award two (2) $1500 scholarships for the purchase of academic tuition and materials. **Distribution of East Tennessee chapter awards are made at the discretion of the local chapter upon proof of the aforementioned eligibility criteria.**

**The Application Package**

Consideration will be given only to candidates submitting complete application packageswhich include: (1) a completed AABE Scholarship application form (copies are acceptable); (2) a letter of enrollment and transcript (3.0 or above); (3) justification of need; (4) letter of reference; and (5) a completed checklist. Please redact Social Security Numbers from any documents.

*Complete application packages* ***MUST BE EMAILED NO LATER THAN April 8, 2016*** *and submitted to the local AABE chapter listed below. Applications returned to the AABE national office or the National Scholarship Committee is in violation of procedures and will not be considered for scholarship support.*

***Email******Completed Application Packages by the due date to the following:*** ***irvinjo@epb.net***

***NOTE: Files larger than 2.5 MB may need to be zipped or reduced to ensure delivery.***

 **SCHOLARSHIP APPLICATION**

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Last First M.I.

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 Street City State Zip

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

Cell Phone (\_\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sex: M\_\_ F\_\_

Ethnicity (optional): African-American \_\_\_\_\_\_\_\_\_\_ Native-American \_\_\_\_\_\_\_\_\_ Hispanic \_\_\_\_\_\_\_\_\_\_

Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Extracurricular Activities** in which you are presently active:

1. Clubs/Organizations\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Community Activities/Volunteerism \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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3. Leadership Roles \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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4. Honors Received \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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5. Current Employment \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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On a separate sheet, describe why you are in need of this scholarship and how the money (if received) will aid you in reaching your educational and/or career goals. Please include your full name on the justification of need.

**I hereby state that the information contained in this application is true and correct to the best of my knowledge.**

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 Applicant’s Signature Date

 **Scholarship Application Checklist**

**The following is a list of qualifications and items that MUST be submitted for a scholarship application to be considered. Every candidate must be able to check each line.**

**As a candidate for the East Tennessee Chapter AABE scholarship program, I affirm the following:**

**\_\_\_\_ I have a major in business, one of the physical sciences, technology, engineering or mathematics fields.**

**\_\_\_\_ I am a member of an underrepresented ethnic group in the sciences, engineering, mathematics and related area of technology.**

**\_\_\_\_ I have submitted a completed AABE scholarship application form (copies are acceptable).**

**\_\_\_\_ I have attached official proof of my school enrollment and transcript.**

**\_\_\_\_ I have included my justification of need.**

**\_\_\_\_ I have attached one (1) letter of reference (from someone other than a family member).**

**\_\_\_\_ I have additional sheets, as needed, to list all of my school and community extracurricular activities.**

**\_\_\_\_ My name appears on ALL attachments.**

**Your signature below signifies you have checked each line above and therefore affirm each statement. After signing, attach this form to the front of your application. Applications will not be reviewed without the checklist attached. Any omissions or misrepresentations of the truth will be grounds for disqualification.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Student’s Name (PRINT)**

**Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Student’s Signature Date**