The Florida Educational Facilities Planners’ Association, Inc. is a statewide organization of facilities planners and associate members involved in planning public educational facilities in K-12, colleges and universities. The purpose of the organization is to further the knowledge of the planner and offer a source of current information and interplay of ideas among professionals. FEFPA is offering scholarships of $3,000 each to be paid at the rate of $1,500 per semester. The number of awards will be determined based on sponsorship funding.

WHO CAN APPLY

Applicant must be a permanent Florida resident, enrolled and attending a full-time degree program at an accredited Florida college or university, who is majoring in facilities planning or a field related to facilities planning. Applicant must be enrolled as a Sophomore, Junior, Senior or Graduate student. Applicants are not eligible to apply during their first year of college or university. Current and former members of the FEFPA Board of Directors are not eligible to apply. Part-time students with full-time employment will be considered if pursuing a degree in facilities planning or related field.

WHEN TO APPLY

Completed applications packages must be received no later than June 1, 2018, for the academic year beginning August, 2018.

HOW TO APPLY

Application packages must include the items listed below and transmitted electronically as a single PDF document to: griffith@fiu.edu. FEFPA must receive the completed application package before the above stated deadline, and must include the following:

- An Application Form completed in its entirety, signed and dated by the applicant.
- An Appraisal Form completed and signed by the applicant’s major professor, supervisor or department head, as appropriate. Multiple appraisals will be accepted. Each appraisal must be signed and scanned to be included in the PDF package.
- A one-page essay describing why the applicant believes they deserve this scholarship. The essay must be typed, single spaced.
- A current transcript from the applicant’s college or university. This may be an unofficial screen shot from the institution’s web site for the purpose of the application process. Winners will be required to send an official sealed transcript prior to issuing their award check.
- Current SAT Scores OR equivalent.
GRADE POINT REQUIREMENT
Applicants must have a minimum 3.0 grade point average for all college and/or university work completed in order to be eligible.

GENERAL INFORMATION
Applicants must complete ALL questions and forms to the best of their ability. If a question is not applicable, a written explanation must be given. Failure to answer any of the questions may constitute a basis for elimination of their application from further consideration.

Successful candidates will be notified of their selection in July of the academic year of the award. Awards are only valid for Florida public colleges and universities.

An official, sealed transcript from the issuing college or university will be required from the successful candidate(s), and must be received prior to the fall term, before the scholarship check will be issued. Students who withdraw prior to the completion of the semester are required to pay back the scholarship, in full, for that semester.

SELECTION CRITERIA
Selection ranking will be based on a 20 point scale, as follows:

- Chosen Field of Study – 4 points
- Need – 3 points
- Academic Excellence – 3 points
- Essay – 3 points
- Appraisal Form – 2 points
- Community Involvement – 2 points
- Employment – 2 points
- Transcripts – 1 point

APPLICATION ACCEPTANCE POLICY
FEFPA reserves the right to eliminate applications from consideration which are unsigned, incomplete and/or missing documentation without further notice to the applicant. All applications become the property of FEFPA. The selection committee’s decision is final.

WEB PAGE
Information may be found on the FEFPA web page: www.fefpa.org.

QUESTIONS
Should you have further questions, you may contact Bob Griffith, FEFPA Scholarship Selection Committee Chair at 1-305-348-4090.
FEFPA SCHOLARSHIP
APPLICATION FORM

INSTRUCTIONS

Every question must be answered. If your response is “not applicable,” then you must indicate why it is not applicable. Please review the checklist at the bottom of this form to ensure completion of your application package.

SECTION I – GENERAL

Name: ________________________________ Date of Birth: ________________________________

Address (school year): ________________________________________________________________

Address (permanent): ________________________________________________________________

United States Citizen: Yes ______ No ______  Permanent Resident Alien: Yes ______ No ______

SECTION II – DEPENDENT STATUS (if applicable)

Father’s Name and Address: __________________________________________________________

Father’s Occupation: __________________ Current Annual Income: $ ____________________

Mother’s Name and Address: __________________________________________________________

Mother’s Occupation: __________________ Current Annual Income: $ ____________________

If there is additional information relevant to your parent’s income you believe we should be aware of, please indicate: __________________________________________________________

Names and ages of all siblings: ______________________________________________________

Names of your immediate family presently in college or university, and how their tuition is financed: __________________

Spouse’s Name and Address: ______________________________________________________

Spouse’s Occupation: __________________ Current Annual Income: $ ____________________

Number of Children and Ages: ______________________________________________________
SECTION III – BUDGET & FUNDING

Annual School Expense Estimate (please be specific):

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuition</td>
<td>$__________</td>
</tr>
<tr>
<td>Books</td>
<td>$__________</td>
</tr>
<tr>
<td>Rent, Utilities</td>
<td>$__________</td>
</tr>
<tr>
<td>Food</td>
<td>$__________</td>
</tr>
<tr>
<td>Transportation</td>
<td>$__________</td>
</tr>
<tr>
<td>Medical Expenses</td>
<td>$__________</td>
</tr>
<tr>
<td>Clothing/Personal Items</td>
<td>$__________</td>
</tr>
<tr>
<td>Miscellaneous</td>
<td>$__________</td>
</tr>
</tbody>
</table>

**TOTAL EXPENSES** $__________

Funds Available for Use During the School Year:

<table>
<thead>
<tr>
<th>Source</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal Income from Employment</td>
<td>$__________</td>
</tr>
<tr>
<td>Loans</td>
<td>$__________</td>
</tr>
<tr>
<td>Grants and Scholarships (explain in detail)</td>
<td>$__________</td>
</tr>
<tr>
<td>Family Contribution (allowance, etc.)</td>
<td>$__________</td>
</tr>
<tr>
<td>Interest: savings accounts, stock dividends, income from trust fund(s)</td>
<td>$__________</td>
</tr>
<tr>
<td>All Other Available Funds (gifts, etc.)</td>
<td>$__________</td>
</tr>
</tbody>
</table>

**TOTAL FUNDS AVAILABLE** $__________

Expense/Funding Additional Information or Explanation:

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________
SECTION IV – EDUCATION

Current University or College: ______________________________________________________

Current Year: Sophomore: ________ Junior: ________ Senior: ________ Graduate School: ________

Major Field of Study: _______________________________________________________________

If not Facilities Planning, how is this field related? ____________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

SECTION V - CURRENT EMPLOYMENT

Employer: ________________________________________________________________

Address: ___________________________ Phone: ___________________________

Position: ___________________________ Hours Per Week: ______________________

Employer: ________________________________________________________________

Address: ___________________________ Phone: ___________________________

Position: ___________________________ Hours Per Week: ______________________

Employer: ________________________________________________________________

Address: ___________________________ Phone: ___________________________

Position: ___________________________ Hours Per Week: ______________________

SECTION VI – COMMUNITY SERVICE

List all community service experience to date (please be specific): ______________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________
SECTION VII – REFERENCES/CRIMINAL BACKGROUND

List two references other than relatives.

Name: ___________________________________________ Phone: ___________________________________________
Address: _______________________________________________________________________________________
Employer/Occupation: _____________________________________________________________________________
Name: ___________________________________________ Phone: ___________________________________________
Address: _______________________________________________________________________________________
Employer/Occupation: _____________________________________________________________________________
Have you ever been convicted of any crime: If so, please explain in detail, including date(s)/location(s):
_______________________________________________________________________________________________
_______________________________________________________________________________________________
_______________________________________________________________________________________________

SECTION VIII – CHECKLIST

__________ Completed and Signed Application Form

__________ Appraisal Form (multiple signed and scanned appraisals will be accepted)

__________ Essay, One-Page, Single Spaced

__________ Current Transcripts (screen shot image will be accepted for application process)

__________ Current SAT Scores OR equivalent

REMINDER: Your application package must include all of the above-listed documents and must be provided electronically as a single PDF document, emailed to griffith@fiu.edu, prior to the stated deadline.

_________________________________________  ________________________________
Applicant Signature                             Date
**APPLICANT INSTRUCTIONS:** Please complete this portion of this form and provide it to your supervisor, department head, or professor who is familiar with you and who can render an informed opinion. This appraisal form must be signed and included with your application package, and received prior to the deadline indicated.

Applicant’s Name (print or type): __________________________________________

Applicant’s College or University: _________________________________________

Students have the right to inspect appraisals that are submitted in conjunction with their applications, or they may waive this right. Under the provision of the Family Educational Rights and Privacy Act:

- [ ] I have retained my right to access this information; or
- [ ] I have waived my right of access to this information

Applicant’s Signature: __________________________________ Date: __________

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**APPRAISER INSTRUCTIONS:** Please check each characteristic in the appropriate box to show your appraisal of the applicant on each characteristic. Please use current students and recent graduates as your point of reference for comparison.

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>No Basis for Judgment</th>
<th>Below Average (Lowest 40%)</th>
<th>Average (Middle 20%)</th>
<th>Very Good (Next 20%)</th>
<th>Unusual (Next 10%)</th>
<th>Outstanding (Highest 10%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Native Intelligence, Analytical Powers</td>
<td></td>
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<tr>
<td>Independence of Thought, Originality</td>
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<tr>
<td>Effectiveness of Communication Oral &amp; Written</td>
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<tr>
<td>Judgment and Maturity</td>
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<tr>
<td>Industry, Scholastic and Non-Scholastic Activities</td>
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<tr>
<td>Leadership Ability</td>
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</tbody>
</table>

Additional Comments: _______________________________________________________

_________________________________________________________________________

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_________________________________________________________________________

_________________________________________________________________________

Appraiser’s Name (print or type): __________________________________________

Appraiser’s Title/Department: _____________________________________________

Appraiser’s Signature: __________________________________ Date: __________