

**APICS TOLEDO CHAPTER #69
ACADEMIC SCHOLARSHIP PROGRAM**

**APPLICATION INFORMATION
AND FORMS**

Applications must be mailed to:

**APICS Toledo Scholarship Committee
P O Box 2823
Toledo, OH 43606**

**APICS TOLEDO CHAPTER #69
ACADEMIC SCHOLARSHIP PROGRAM
GENERAL INFORMATION**

FOCUS

The focus of this scholarship program is the recognition of academic excellence among college and university students majoring in **operations management, supply chain management, or other closely related academic programs.** The theme of this scholarship program is "**manufacturing excellence begins with academic excellence.**"

OBJECTIVES

A major goal of the APICS Toledo Chapter is to better educate and inform the professional community which we serve. One way that we may do so is to aid in the education of highly talented students planning careers in operations management, supply chain management or other closely related fields.

As such, a major objective of the scholarship program is to encourage stronger ties between the local academic community and APICS Toledo. The purpose of this objective is to support the efforts of students enrolled in local colleges and universities who will most likely be employed by firms operating within the greater Toledo area.

A second objective is to assist the children or spouses of chapter members currently pursuing a college or university degree, or planning to begin their pursuit of such a degree during the academic year. Although preference will be given to major areas of study related to operations management, supply chain management or other closely related fields, other degree programs will also be considered.

The primary purpose of this objective is to reward APICS Toledo members for their involvement, support, and service through the provision of educational assistance to their families.

SCHOLARSHIP AWARDS

Six general \$500 academic scholarships, 4 undergraduate and 2 graduate, will be awarded to outstanding students (including APICS members, their spouses and children) attending two-year or four-year colleges and universities within the greater Toledo area.

The greater Toledo area consists of Northwest Ohio and Southeast Michigan. These scholarships are available for anyone majoring in operations management, supply chain management, or closely related fields.

Two special \$500 academic scholarships, undergraduate or graduate, will be awarded to outstanding students who are either children or spouses of APICS Toledo members. Members themselves are not eligible to apply for this scholarship fund. These scholarships are available for any two-year or four-year college or university (i.e., not restricted to the greater Toledo area). Although preference will be given to major areas of study related to operations management, supply chain management or closely related fields, other degree programs will be considered.

USE OF SCHOLARSHIP FUNDS

All scholarship funds will be issued jointly in the name of the student and the college or university. The specific purpose of the funds is for payment of tuition, books, supplies, and / or other academic materials related to coursework.

BASIC ELIGIBILITY

All applicants must meet the three criteria listed below to be eligible for scholarship consideration. Students who fail to meet these criteria are ineligible for further consideration.

1. The applicant must be planning to attend an institution of higher education during the academic school year on at least a one-half time basis.

If you are unsure if your school qualifies, please contact the APICS Toledo Scholarship Committee at the address provided later in this document.

2. The applicant must be in "good academic standing" at the high school, college or university they are currently attending.

A student who is considered to be on probation, suspended, or in otherwise poor standing with the current academic institution they are attending is not eligible to apply.

3. If applying for the special scholarship funds, the student's parent or spouse must currently be in good standing with the APICS Toledo Chapter and have been a member continuously for a period of at least one year preceding the scholarship application deadline (**December 1st**).

APPLICATION PROCESS

All applicants must submit the following information to be eligible for scholarship consideration. Students who fail to submit the requested information will be ineligible for further consideration.

1. Basic Student Information.

Each applicant must complete the student information sheet provided.

The applicant must also specify the scholarship (one only) for which they are applying.

2. Career Plan Statement.

Each applicant must submit a typed, double-spaced, one page career plan statement which outlines the student's future educational and employment objectives.

3. APICS Student Chapter Participation.

Applicants who have actively participated in an APICS student chapter during the current academic year may receive credit for their involvement and participation. Students seeking credit for student chapter involvement and participation must have their student APICS chapter faculty advisor directly submit a completed APICS Student Chapter Participation form to the APICS Toledo Scholarship Committee.

4. Letter of Recommendation.

Each applicant must have **ONE** letter of recommendation submitted **directly** to the APICS Toledo Scholarship Committee.

Ideally, this letter will be written by a current or former professor, teacher, or instructor and should state why he / she considers the student to be deserving of an academic scholarship.

The letter should also specifically state the nature of the relationship to the student (e.g., current or former teacher).

This evaluation should not exceed one page in length and should be mailed directly to the APICS Toledo Scholarship Committee.

5. Grade Point Average (GPA).

The student must have his/her current or most recent academic institution submit a letter **directly** to the APICS Toledo Scholarship Committee on his or her behalf. The letter should state the student's current grade point average and the current academic standing within that institution or the degree earned if graduated. If the recommending instructor has direct access to this information, he or she may include it in the letter of recommendation and the student may disregard this requirement.

6. Application Deadline.

The application deadline is December 1st.

Applications received after this date will not be considered for a scholarship.

A completed application comprises

- 1) student information sheet
- 2) career plan statement
- 3) evaluation of your APICS student chapter participation (if appropriate)
- 4) letter of recommendation
- 5) statement from your school addressing GPA and academic standing

Items 1 through 3 must be submitted by the student

Item 4 should be submitted directly to the Scholarship Committee by the Academic Referee

Item 5 should be submitted directly to the Scholarship Committee by the Academic Institution

CORRESPONDENCE

All applications and supporting documentation should be mailed to the APICS Toledo Scholarship Committee at the address below.

APICS TOLEDO Scholarship Committee

P O Box 2823

Toledo, OH 43606

Applicants will be notified of the Scholarship Committee's decision regarding their application by December 31st.

The Scholarship Committee's decision is final and cannot be appealed

Further Information

Questions about the application process may be mailed to the Scholarship Committee at the address above, alternatively they may be sent by e-mail to education@apicsToledo.org

Submission of a question does not extend the application deadline.

**APICS TOLEDO ACADEMIC SCHOLARSHIP PROGRAM
STUDENT INFORMATION SHEET**

I. Scholarship for which you are applying. Check one only.

- (a) _____ General Public - Undergraduate Student Scholarship
(b) _____ General Public - Graduate Student Scholarship
(c) _____ APICS Toledo Member Child or Spouse Scholarship

II. Student Information:

Name: _____

Home Address: _____

Home Phone #: _____ **Work or cell #:** _____

E-mail Address: _____

Current School: _____

School Information (school you will be attending during the next academic semester):

Name of School: _____

School Address: _____

Academic Major: _____

Academic Minor: _____

Expected Graduation Date: _____

Degree Level: Associate _____ Bachelor _____ Master _____ Ph.D. _____

III. Recommending Instructor Information

Name: _____

School/Dept.: _____

Phone #: _____

IV. APICS Member Information

(Required if you checked I.(c) above, this information is available on the APICS membership card.):

Name: _____

APICS Member #: _____ **Member Since:** _____

APICS TOLEDO ACADEMIC SCHOLARSHIP PROGRAM

APICS STUDENT CHAPTER PARTICIPATION

Student's Full Name: _____

Student's School: _____

Directions:

This form is to be completed by the APICS student chapter advisor and mailed directly to the APICS Toledo Scholarship Committee address provided at the bottom of the form.

I. Student Involvement and Participation:

On a scale of one (1) through ten (10), please rate this student's level of involvement and participation for each of the following activities in your school's student APICS chapter.

A score of one (1) indicates very little or no involvement and participation.

A score of ten (10) indicates exceptional or very strong involvement and participation.

A score of five (5) indicates an average level of participation and involvement.

_____ 1. Attendance at student chapter meetings and related events.

_____ 2. Attendance at APICS Toledo chapter meetings and related events.

_____ 3. Participation in special committees, chapter membership drives, or other activities designed to enhance or promote student chapter development and success.

_____ 4. Student chapter officer or board member service and leadership,
Please list all officer / board member positions held by the student:

II. Length of Membership:

Please indicate the student's total length of student chapter membership in months _____

Student Chapter Advisor Information:

I hereby certify the above stated information is true and correct to the best of my knowledge and belief.

Advisor Name: _____

School Phone #: _____

Advisor Signature: _____

Date: _____

Please submit directly to:

APICS Toledo Scholarship Committee

P O Box 2823

Toledo, OH 43606