

## **Louisiana Institute for Administrative Assistants (LIAA)** **“Dr. Shirley A. White” Annual Scholarship**

**Award:** The “Dr. Shirley A. White” Annual Scholarship will be awarded to a full- or part-time student who is enrolled in a graduate or undergraduate program related to business management.

**Amount:** \$1000 (\$500 per semester enrolled)

**Closing Date for Applications:** August 1

**Award Announcement:** September 1

### **Eligibility Requirements:**

- \* Applicant must be a U.S. Citizen and a Louisiana resident.
- \* Applicant must be currently employed full-time by a Louisiana government agency or firm
- \* Applicant must be a current LIAA member.
- \* Applicant must enroll in an accredited Louisiana University or Louisiana Community College and pursue course work or a degree program in a field related to business management as a part- or full-time student at the graduate or undergraduate level.
- \* There are no restrictions on age, sex, handicap, or financial need.
- \* Current recipients may reapply annually as long as a G.P.A. of at least 2.0 is maintained.

### **Criteria for Scholarship Award:**

- \* plans to pursue a career in state or local government or with a corporation/firm
- \* past academic record and/or experience
- \* strength of past course work and present plan of study
- \* grade point average

**Application:** Applicants must submit the following documents for consideration by the scholarship selection committee:

- \* application form with addendum
- \* statement of proposed plan of graduate or undergraduate study and career plans
- \* undergraduate and graduate transcripts
- \* resume
- \* statement from employer indicating approval
- \* letters of recommendation (optional)

All of the above items are to be submitted by the applicant in a single envelope, postmarked no later than August 1 to:

**LIAA Scholarship Committee, ATTN: Billie Tripp, P.O. Box 1029, Gonzales, LA 70707-1029.**

The LIAA Scholarship Committee will review all applications and make final selections for the award. The winner(s) will be notified by September 15. For additional information, call **Billie Tripp (225) 644-0619**.

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**Course of study data to be completed by the applicant**

List all the courses you have completed since you began your current program. For each course, record the grade you received.

<b>Course Title</b>	<b>Grade</b>
_____	_____
_____	_____
_____	_____
_____	_____

(use a separate sheet of paper if necessary)

List all the courses you plan to take to complete your course of study.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(use a separate sheet of paper if necessary)

List any major papers, theses or internships you have completed or are working on that relate to your graduate/undergraduate program or career choice.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(use a separate sheet of paper if necessary)

Attach a statement (not to exceed one page typed, double spaced) describing your proposed plan of study and your career plans. Be specific about the type of career you plan to pursue and why you chose it. Also describe any work experience, internships and volunteer work on projects, relative to your plan of study or career choice.

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**Application form to be completed by the applicant.**

Name \_\_\_\_\_ Title \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_  
P.O. Box or Street                      City                      State                      Zip

Telephone (    ) \_\_\_\_\_ Fax (    ) \_\_\_\_\_

Email \_\_\_\_\_

Country of Citizenship \_\_\_\_\_

Graduate School \_\_\_\_\_

Undergraduate School \_\_\_\_\_

Degree Sought \_\_\_\_\_

Anticipated Date of Graduation \_\_\_\_\_

**Academic History  
(Other) Undergraduate University(ies):**

University \_\_\_\_\_

Major/Minor \_\_\_\_\_

Dates \_\_\_\_\_

University \_\_\_\_\_

Major/Minor \_\_\_\_\_

Dates \_\_\_\_\_

Graduate Grade Point Average: \_\_\_\_\_

Undergraduate Grade Point Average: \_\_\_\_\_

**Louisiana Institute for Administrative Assistants (LIAA)  
Addendum to Scholarship Application**

Name of Applicant \_\_\_\_\_

**Certification by Applicant**

Does your employer currently have any type of tuition assistance program that would provide financial assistance for you to attend college?     **Yes**    **No**

If yes, please answer the following questions and attach a copy of the employer guidelines:

Are you eligible to apply for such assistance under the guidelines of your employer's plan?     **Yes**   (    **Fully eligible**;    **Partially eligible**)     **No**

If yes, how much assistance are you entitled to under the employer sponsored program? \$ \_\_\_\_\_

Have you applied for assistance under your employer sponsored program? If not, explain why.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you received or been notified of an award for any tuition or scholarship assistance programs with any college, university or other organizations other than this program?     **Yes**    **No**. If yes, please provide copies of applications that you filed with those programs and any letters of award that you have received.

**Please Note:** *Being eligible for other programs does not disqualify you for the LIAA program. Any award of financial assistance by another program may limit an award by this program.*

I hereby attest that I have answered the questions above accurately, to the best of my knowledge.

Signature of Applicant: \_\_\_\_\_