



GATEWAY DISTRICT SCHOLARSHIP PROGRAM



Purpose

The Gateway District Association of Student Councils (GDASC) seeks to promote active participation by secondary school students in Student Councils locally as well as in district, state, and national programs. In so doing, opportunities and growth experiences are provided to develop leadership skills.

Student Scholarships to Fulton

The GDASC will award up to six student scholarships for participation in the Summer MASC Leadership Workshop at Fulton, Missouri, from June 6-11, 2010. Selection will be made based upon evidence of past, present, and future leadership potential and will pay for the Fulton registration fee for the four high school and two junior high/middle school recipients. *The Junior High School/Middle School application must nominate a student who will still be a student at that same school for 2010-2011.* In addition to attending Fulton, scholarship recipients will be recognized at the GDASC Fall Conference and may be asked to speak about their experience.

Senior Scholarship

The GDASC will award one \$500 to a college-bound senior who is currently a member of a Student Council in a Gateway District member school. Selection will be based on evidence of academic excellence and leadership.

Advisor Scholarship

The GDASC will also award an advisor scholarship to be used for the recipient's choice of workshops; the advisor award will not exceed \$200.

Application Procedures (Please see each individual form for the most complete directions)

- ◆ Information and application forms will be sent via e-mail to all GDASC member schools. **Each school may submit ONE application in EACH of the scholarship categories (Fulton, Senior, and Advisor), which means no more than a total of three applications per member school. Please DO NOT include any supplemental information. Only the answers to the questions asked on the application will be considered in selecting recipients.**
- ◆ **The student application must include a letter of recommendation (on school letterhead) from the Advisor.** In the recommendation letter, please describe in detail at least **two** specific examples of the student's leadership abilities which have been personally observed by the Advisor.
- ◆ The Scholarship Committee will evaluate applications based primarily on **content**, but may also take into account **appearance and proper writing skills.** **ALL FORMS ARE TYPEABLE.**
- ◆ The Scholarship Committee will select the winners and two alternates for each scholarship. **The Scholarship Committee Chairperson will notify all schools in the GDASC of the selected winners via e-mail within three weeks of the application deadline.**
- ◆ The selected students and advisor are responsible for completing their own registration forms for their workshops. **The GDASC District Representative will submit payment of the workshop fees for the student recipients directly to the MASC State Director. The selected advisor should contact the GDASC District Representative for payment of the \$200 award upon selection of a workshop.** The selected advisor and students are responsible for their own travel arrangements to and from the workshop and for personal spending money.
- ◆ Completed application in all categories must be **postmarked by Monday, April 19th 2010** and submitted to Andy Gensler, Eureka High School, 4525 Highway 109, Eureka, MO 63025. They can also be faxed to 636 938-2411 Any questions can be e-mailed to Andy Gensler at genslerandrew@rockwood.k12.mo.us.



GATEWAY DISTRICT ADVISORS SCHOLARSHIP



Directions: Please complete this form and mail it by Monday, April 19th, 2010 to:

**Andy Gensler, Chairperson
GDASC Scholarship Committee
Eureka High School
4525 Highway 109
Eureka, MO 63025**

Please do NOT include any supplemental information. Only the information from your responses to the questions on this form will be considered when selecting a recipient.

Or Fax to: 636 938-2411

Any questions can be e-mailed to Andy Gensler at genslerandrew@rockwood.k12.mo.us.

Please type or print in black ink:

Name _____ Home Phone _____

Home Address _____

City _____ State _____ Zip _____

School Name _____ School Phone _____

School Address _____

City _____ State _____ Zip _____

E-mail address _____

- 1. How long have you been a Student Council Advisor? _____ Year(s)**
- 2. How long do you anticipate remaining in this position at this school? _____ Year(s)**

Please answer the following questions. You may use additional pages if needed.

1. Why did you become a Student Council Advisor at your school?

2. Describe your role as a Student Council Advisor.

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3. How do you plan to use this scholarship?

4. How would this workshop/program that you are planning to attend assist you in becoming a more effective Student Council Advisor?

5. Is there anything else you would like to tell the committee?

Signature of Advisor Applicant

Date