

# Oklahoma Association of Minorities in Career and Technology Education

## ***OAMCTE SCHOLARSHIP***

The Oklahoma Association of Minorities in Career and Technology Education (OAMCTE) believes that educating young people in career and technology education is a positive step in providing role models for future generations of youth. As we continue to focus on education, our efforts turn to an important aspect of our organization scholarship.

One of the goals of our scholarship program is to provide assistance to deserving minority students who plan to further their education. In so doing, we are offering two (2) **Rena Washington-Lorine DuBose Memorial Scholarships** in the amount of **\$1,000 each**. We believe this is one small way of helping to make this dream a reality for individuals who can become positive role models for others.

Applicants for the scholarship must plan to enroll in a full-time program at an Oklahoma Career and Technology Center or as a full-time student in an accredited institution of higher learning for the Fall Semester of 2023 and the Spring Semester of 2024.

The recipients must provide proof of enrollment prior to receiving the awards. After proof of enrollment is provided, the scholarship funds will be made available to the recipients chosen career and technology center or institution of higher learning. The student will then receive the full scholarship amount during the first semester, upon enrollment. Scholarship proceeds must be used to assist with the cost of tuition, fees, books, and/or tools. If a scholarship recipient does not complete his or her course of study, the remaining proceeds will be returned to the donor, namely the Oklahoma Association of Minorities in Career and Technology Education or the Oklahoma CareerTech Foundation.

Selection of the Scholarship recipients are based on financial need and the ability to benefit. Applications **must be post marked or emailed no later than Monday, March 27, 2023**. Scholarship winners will receive notification no later than Friday, April 17, 2023. *Recipients are invited to attend the Career & Technology Summer Conference where they will be presented with their award.*

Enclosed is the application form, which may be duplicated as needed. Please give the form to students who meet the qualifications. Your help is vital in making this effort a successful one. If you have questions, please contact me at 918-828-3072. Send completed applications to: the OAMCTE Scholarship Committee, Email: Tasheika.Heath@tulsatech.edu or Mail: Tulsa Technology Center BA Attn: Tasheika Heath, 4000 W Florence St, Broken Arrow, Ok 74011

**Tasheika Heath, Chairperson**  
**OAMCTE Scholarship Committee**

## ELIGIBILITY CRITERIA

Applicants must meet the following specific criteria:

- 1) Be a member of a racial minority.
- 2) Be a high school graduate or possess a G.E.D.
- 3) Meet the residency requirements of Oklahoma post-secondary institutions and Career Tech Centers.
- 4) **Be currently enrolled or plan to enroll in a full-time program at an Oklahoma Career and Technology Center or as a full-time student in an accredited institution of higher learning for the Fall and Spring semester of the ensuing school year.**
- 5) Submit two personal reference letters and one from a present or former employer. (A letter from an educator will be accepted, if no prior employment experience).
- 6) Submit a copy of high school transcript, diploma or G.E.D. certificate.
- 7) Submit a **completed** Scholarship Application.

Interested students are encouraged to apply as early as possible. For questions: contact Tasheika Heath, Scholarship Committee Chairperson at 918-828-3072 Tasheika.Heath@tulsatech.edu or Kneisha Jones 918-828-1003 Kneisha.Jones@tulsatech.edu

## INSTRUCTIONS

Read carefully to complete the application:

1. Include a summary of why you have applied for this scholarship and how this scholarship will help you achieve your career goals. (500-word minimum)
2. Please neatly print or type all information on the application.
3. Your high school or college transcript **MUST** be included with the scholarship application, or in event of a G.E.D., a copy of the certificate.
4. Fill in ALL blanks. If a question or blank is “**Not Applicable**” please state (N/A).
5. **Three (3)** reference letters from persons other than relatives or students **MUST** be submitted with this application. Submit two personal reference letters *and* one from a present or former employer. (A letter from an educator will be accepted, if there is no present or prior employment experience). Reference letters must be on letter size paper (8 ½ X 11).
6. A joint committee will screen applications. Return this completed application along with other required documents to:  
**Tulsa Technology Center BA**  
**Attn: Tasheika Heath**  
**4000 W Florence St,**  
**Broken Arrow, Ok 74011**
7. Mailed applications must be **post marked no later than Monday, March 27, 2023**
8. Emailed applications must be **submitted no later than 5:00 p.m. Monday, March 27, 2023**
9. Winners are notified by mail and/or phone, please make sure that the contact information provided is correct and current.



# Oklahoma Association for Minorities in Career & Technology Education (OAMCTE)

## RENAE WASHINGTON and LORINE DUBOSE MEMORIAL SCHOLARSHIP APPLICATION

### STUDENT INFORMATION

DATE \_\_\_\_\_

Full Name \_\_\_\_\_ Social Security No. \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Date of Birth \_\_\_\_\_ Home Telephone (\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_

Race: \_\_\_\_\_ American Indian/Alaskan \_\_\_\_\_ Asian \_\_\_\_\_ Black/African American  
\_\_\_\_\_ Hispanic/Latino(a) \_\_\_\_\_ Native Hawaiian/Pacific Islander \_\_\_\_\_ White/Caucasian

Educational program (Career Tech program or College Major) in which you plan to enroll.

\_\_\_\_\_

Name and location of the technology center, school or college you will be attending.

\_\_\_\_\_

- Have you applied to the school/program? Yes ( ) No ( )
- Have you been accepted to the school/program? Yes ( ) No ( )
- Expected Graduation Date: \_\_\_\_\_

Post-Secondary Schools Attended: (Colleges, Private/Trade Schools, Tech Centers, etc.)

| <u>School &amp; Location</u> | <u>Dates of Attendance</u> | <u>Major/Program/Honors</u> |
|------------------------------|----------------------------|-----------------------------|
| _____                        | _____                      | _____                       |
| _____                        | _____                      | _____                       |

MILITARY EXPERIENCE: (Describe Enlistment and Dates) \_\_\_\_\_

\_\_\_\_\_

**FINANCIAL/EDUCATIONAL RESOURCES:**

Are you currently employed? Yes ( ) No ( )

Please list your last two (2) employers, beginning with present:

| <u>Employer</u> | <u>Location</u> | <u>Dates (From &amp; To)</u> | <u>Position</u> |
|-----------------|-----------------|------------------------------|-----------------|
|                 |                 |                              |                 |
|                 |                 |                              |                 |

***Financial/Educational Resources continued***

Are you married? \_\_\_\_\_ If yes, does your spouse work? Yes ( ) No ( )

Number of persons residing in your household \_\_\_\_\_

**OTHER FINANCIAL RESOURCES**

Fill in the blanks to indicate the amount of additional financial assistance you will receive from other resources during your anticipated enrollment. Please indicate whether **annual** or **monthly** by circling **A** for annual or **M** for monthly.

- Amt. \$ \_\_\_\_\_ A / M Current Salary (if applicable)
- Amt. \$ \_\_\_\_\_ A / M Non-Traditional Training Program
- Amt. \$ \_\_\_\_\_ A / M Displaced Homemaker / Single Parent / Single Pregnant Woman Program
- Amt. \$ \_\_\_\_\_ A / M Veterans Benefits
- Amt. \$ \_\_\_\_\_ A / M Social Security
- Amt. \$ \_\_\_\_\_ A / M American Indian Training/Employment Service
- Amt. \$ \_\_\_\_\_ A / M Workforce (WIA)
  - Dislocated Worker \$ \_\_\_\_\_
  - Economically Disadvantaged \$ \_\_\_\_\_
- Amt. \$ \_\_\_\_\_ A / M AFDC/TANF
- Amt. \$ \_\_\_\_\_ A / M Vocational Rehabilitation
- Amt. \$ \_\_\_\_\_ A / M Other (include PELL, OTAG grants, scholarships, loans, etc.)

\_\_\_\_\_

**\$ \_\_\_\_\_ = Total annual** family income from all sources, while attending school.

*I certify that all the information on this application is true and complete to the best of my knowledge. If asked by the committee, I agree to provide proof of the information that I have provided in my application.*

Signature \_\_\_\_\_

Date \_\_\_\_\_