Stanislaus County Office of Education

Scott Kuykendall, Superintendent
1100 H Street • Modesto, CA 95354 • (209) 238-1700 • FAX (209) 238-4201

TO: SCOE Employees

FROM: Scott Kuykendall

DATE: January 12, 2026

RE: **Children of SCOE Employees Scholarship**

The Children of SCOE Employees Scholarship will be awarded to a graduating senior (12th grade) who is a child of a permanent employee of the Stanislaus County Office of Education (SCOE).

An Advisory Committee, appointed by the Stanislaus County Superintendent of Schools, will select the scholarship recipient(s). The amount of the scholarship will be in the amount of $500. A minimum of one (1) scholarship will be offered each year.

Application deadline is March 16, 2026 Scholarships will be announced in April and will be awarded during the May 12th Stanislaus County Board Meeting.

CRITERIA TO APPLY

1. Graduating high school senior who is a child of a permanent employee with a minimum of (1) year of service at the Stanislaus County Office of Education.
2. Students who earned a 2.5 GPA during their sophomore and junior years
3. The recipient will be expected to attend a community college, university, or vocational-technical institute.
4. Demonstrated leadership, evidence of participation in school activities, good citizenship, and show a potential for post-secondary study.

REQUIRED ATTACHMENTS:

a. An autobiographical essay, including extra-curricular activities and future plans

b. Two (2) letters of character reference

c. Transcripts to verify grade point average from the sophomore and junior year

Send completed applications via US Mail, in person or Route mail to be received in office by deadline, not postmark:
Scholarship Advisory Committee Chairperson, StanC2C
Stanislaus County Office of Education
U.S. Mail: 1100 H Street, Modesto, CA 95354
School Route Mail: Route #005

APPLICATION FOR THE
CHILDREN OF SCOE EMPLOYEES SCHOLARSHIP

TYPE OR PRINT YOUR INFORMATION BELOW TO ACT AS A COVER SHEET

Name _____
First, Last

Home Address _____
Street, City, Zip

Phone Number _____ Email: _____

High School Attending _____

School Address _____
Street, City, Zip

Principal's Name_____ Counselor's Name_____
First, Last First, Last

Planning to Attend:_____
(List name of College, University or Vocational Program)

Major or Area of Focus:_____

Parent Name _____Work Phone #_____

Job Title _____Work Site_____

Parent's years of full-time employment with the Stanislaus County Office of Education _____

PLEASE ATTACH TO THIS APPLICATION:

a. Autobiographical essay *(including activities and future plans).*
b. Two letters of character references.
c. Transcript from the sophomore and junior year to verify 2.5 grade point average