



## **ACADEMIC SCHOLARSHIP PROGRAM**

### **APPLICATION INFORMATION AND FORMS**

Applications may be mailed to:

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

Or sent by email to

[education@apicsToledo.org](mailto:education@apicsToledo.org)

Subject line of email must include “Scholarship Application”

**Applications must be submitted between October 1<sup>st</sup> and November 30<sup>th</sup>**



## 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 by providing financial support for the education of highly talented students planning careers in operations management, supply chain management or other closely related fields who are enrolled in local colleges and universities.

A second objective is to provide financial assistance 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 with, support of, and service to the chapter through the provision of financial assistance to their families.

### **SCHOLARSHIP AWARDS**

**\$500 Academic Scholarships**, graduate or undergraduate, may be awarded to students majoring in operations management, supply chain management or closely related fields.

Applicants must be full-time students currently attending two-year or four-year colleges or universities within the greater Toledo area. The greater Toledo area consists of Northwest Ohio and Southeast Michigan.

APICS Toledo chapter members are eligible to apply for these scholarships.

**\$500 APICS Toledo Family Member Academic Scholarships**, undergraduate or graduate, may be awarded to outstanding students who are either children or spouses of the following categories of APICS Toledo chapter members, Academic, Enterprise, Professional or Young Professional members.

APICS Toledo chapter members are not eligible to apply for these scholarships for themselves.

Family members of APICS Student Chapter Members (Bowling Green State University and University of Toledo) are ineligible for these scholarships.

These scholarships are available for full-time students currently attending 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.

**Scholarships will be awarded in December for the semester beginning the following January.**

### **USE OF SCHOLARSHIP FUNDS**

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

## **ELIGIBILITY**

All applicants must meet criteria A, B and C listed below to be eligible for scholarship consideration.

Applicants for the Family Member scholarship must also meet criterion D.

Applications from students who fail to meet the relevant criteria will not be considered.

- A. The applicant must be planning to attend an institution of higher education on a full-time basis during the academic semester beginning January of the year after the application is made. For example a student applying by November 30<sup>th</sup> 2015 must be planning to be in full-time education for the semester beginning January 2016. If you are unsure if the geographic location of your school falls inside the greater Toledo area, please contact the APICS Toledo Scholarship Committee at the mailing address or email address provided later in this document.
- B. The applicant must be in "good academic standing" at the college or university they are currently attending. A student who is on probation, suspended, or in otherwise poor standing with the current academic institution they are attending is not eligible to apply.
- C. Applications can be submitted on or after **October 1<sup>st</sup>**, the closing date for applications is **November 30<sup>th</sup>**. Applications postmarked after this date or email applications received after this date will not be considered for a scholarship.
- D. If applying for a Family Member scholarship the applicant's parent or spouse must
  - a. currently be a member in good standing with the APICS Toledo Chapter and
  - b. have been an Academic, Enterprise, Professional or Young Professional member of the APICS Toledo chapter continuously for a period of at least one year preceding the scholarship application deadline.

## **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.

### **A. 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.

### **B. 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.

### **C. 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 submit a completed APICS Student Chapter Participation form **directly** to the APICS Toledo Scholarship Committee by email or US Mail.

### **D. APICS Toledo Chapter Participation**

Applicants who have actively participated in an APICS Toledo chapter event during the current academic year may receive credit for their involvement and participation.

Students seeking credit for Toledo chapter participation must have a current member of the APICS Toledo Board of Directors sign the completed APICS Toledo Chapter Participation and submit it **with** their other scholarship application documents

#### **E. 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.

#### **F. 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.

#### **COMPLETED APPLICATION**

A completed application comprises

- 1) Student information sheet
- 2) Career plan statement
- 3) Evaluation of your APICS student chapter participation (not necessary for family member scholarship)
- 4) Evidence of participation at APICS Toledo events (not necessary for family member scholarship)
- 5) Letter of recommendation
- 6) Statement from your school addressing GPA and academic standing

Items 1, 2 and 4 must be submitted by the student

Item 3 must be submitted **directly by the Student Chapter Advisor**

Item 5 should be submitted **directly by the Academic Referee**

Item 6 should be submitted **directly by the Academic Institution**

#### **CORRESPONDENCE**

Applications and supporting documentation should be sent by US Mail to the APICS Toledo Scholarship Committee at the address below.

**APICS TOLEDO Scholarship Committee**

**P O Box 2823**

**Toledo, OH 43606**

**Alternatively** sent by email to [education@apicsToledo.org](mailto:education@apicsToledo.org)

Subject line of email must include **"Scholarship Application"**

#### **SCHOLARSHIP AWARD DECISION**

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

**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 email to [education@apicsToledo.org](mailto:education@apicsToledo.org)

**Submission of a question does not extend the application deadline.**



**ACADEMIC SCHOLARSHIP PROGRAM - STUDENT INFORMATION SHEET**

**1. Scholarship for which you are applying. Check one only.**

- (a) \_\_\_\_\_ General Public - Undergraduate Student Scholarship
- (b) \_\_\_\_\_ General Public - Graduate Student Scholarship
- (c) \_\_\_\_\_ APICS Toledo Family Member Scholarship

**2. Student Information:**

**Name:** \_\_\_\_\_

**Home Address:** \_\_\_\_\_  
\_\_\_\_\_

**Home Phone #:** \_\_\_\_\_ **Work or cell #:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Current School:** \_\_\_\_\_

**School Information** (school you will be attending during the academic semester beginning January next year):

**Name of School:** \_\_\_\_\_

**School Address:** \_\_\_\_\_  
\_\_\_\_\_

**Academic Major:** \_\_\_\_\_

**Academic Minor:** \_\_\_\_\_

**Student Identity Number:** \_\_\_\_\_ **Expected Graduation Date:** \_\_\_\_\_

**Degree Level:** Associate \_\_\_\_\_ Bachelor \_\_\_\_\_ Master \_\_\_\_\_ Ph.D. \_\_\_\_\_

**3. Recommending Instructor Information**

**Name:** \_\_\_\_\_

**School/Dept.:** \_\_\_\_\_

**Phone #:** \_\_\_\_\_

**4. APICS Member Information (must be Academic, Enterprise, Professional or Young Professional member)**

(Required if you checked 1.(c) above, this information is available on the APICS membership card.):

**Name:** \_\_\_\_\_

**APICS Member #:** \_\_\_\_\_ **Member Since:** \_\_\_\_\_



**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 then mailed or emailed directly to the APICS Toledo Scholarship Committee at the address provided at the bottom of the form.

**I. Student Involvement and Participation:**

On a scale of one (1) through five (5), 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 three (3) indicates an average level of participation and involvement.  
A score of five (5) indicates exceptional or very strong involvement and participation.

\_\_\_\_\_ 1. Attendance at student chapter meetings and related events.

\_\_\_\_\_ 2. Participation in special committees, chapter membership drives, or other activities designed to enhance or promote student chapter development and success.

\_\_\_\_\_ 3. 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 Confirmation:**

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

**Advisor Name:** \_\_\_\_\_

**School Phone #:** \_\_\_\_\_

**Advisor Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Student Chapter Advisor please submit directly**

**By US Mail to** APICS Toledo Scholarship Committee, P O Box 2823, Toledo, OH 43606

**By email to** [education@apicsToledo.org](mailto:education@apicsToledo.org) Subject line of email must include "Scholarship Application"



**ACADEMIC SCHOLARSHIP PROGRAM - APICS TOLEDO CHAPTER PARTICIPATION**

**Student's Full Name:** \_\_\_\_\_

**Student's School:** \_\_\_\_\_

**Directions:**

This form is to be completed by the student and signed by a current member of the APICS Toledo Board of Directors then mailed or emailed directly to the APICS Toledo Scholarship Committee at the address provided at the bottom of the form.

**Student Involvement and Participation:**

List APICS Toledo Chapter events or PDMs you have attended or in which you actively participated, for example as a speaker, since January 1<sup>st</sup> of the current year, with the date(s).  
(Attendance at APICS Toledo Board Meetings will not be considered)

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**APICS Toledo Board Member Confirmation:**

**Toledo Board Member Confirmation:**

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

**Board Member Name:** \_\_\_\_\_

**Board Member Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Student Member please submit with items (1) and (2)**

**By US Mail to** APICS Toledo Scholarship Committee, P O Box 2823, Toledo, OH 43606

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