



# Virginia School Plant Management Association 2019 Scholarship Application

Region #: \_\_\_\_\_

See Attached List for Region #

This form is to be used by applicants to post-secondary institutions and current post secondary students not employed by a school district.

## **Scholarship Program Procedure for Submitting Application**

*Before applying please visit <http://www.vspma.org> to review scholarship eligibility requirements.*

- a. The information shall be completed in Section I by all applicants
- b. High School Seniors and High School Counselor shall complete Section IIa and IIb
- c. Include with the application the following information:
  - i. Three letters of recommendation  
(Must include from a member of Facilities, Maintenance, or Custodial Staff from your school or school division.)
  - ii. Transcript to include grades and attendance
  - iii. A brief statement which describes why you want to be a recipient of the VSPMA Scholarship; the course of study and major you plan to follow; your proposed occupation or profession; and what you want to accomplish upon completion of your studies
  - iv. One page essay of 250 words or less which describes how a clean, well-maintained, and safe school environment makes a difference in a student's education and impacts student achievement.
- d. Scholarship Application documents must be submitted no later April 5, 2019 to Cristina Windover, VSPMA Scholarship Committee Chair  
**Cristina.Windover@lcps.org**  
References and transcripts may be mailed or emailed  
Attn: Cristina Windover, VSPMA Scholarship Chair  
1002 C Sycolin Rd SE, Leesburg, VA 20175
- e. Judging of the applications will be by a committee composed of VSPMA Board Members. The criteria for judging of applicants will include, but not be limited to, ACT and/or SAT scores; GED scores; GPA; curriculum; attendance; honors; extracurricular and work activities; and essay.

- I. **To be completed by all applicants:** (Answer all questions fully and use additional paper as needed. Please provide a permanent address and phone number for contact if needed.)

Name: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

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

Street Address or P.O. Box: \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_, VA Zip Code: \_\_\_\_\_

Additional Point of Contact: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

**High School Seniors Only**

II a (If student is undecided at time of application intended Post-Secondary and Registrar Address may be left blank. A final decision post-secondary school must be made before payment is issued. Scholarship payments are made directly to school registrar.)

Intended Post-Secondary School and Major:

---

Address and P.O. Box for Registrar/Business Office:

---

Diploma or GED Received from:

---

Extracurricular Activities (e.g. Sports, Leadership, Organization/Clubs – show years of involvement, offices held, etc.):

---

Honors, Awards, and Recognition:

---

Community Involvement and Other Activities:

---

Work Experience:

---

## High School Seniors Only

**II b .To be completed by High School Counselor or Principal:** (Principal or Counselor – The VSPMA Membership thank you for your assistance. Please complete this section and provide the applicant's record of high school academic performance as indicated below.)

Academic Information:                      ACT: \_\_\_\_\_ SAT: \_\_\_\_\_

Cumulative High School                      GPA:                      GED:

Days Absent:	Senior Year:	0-5	6-10	10+
	Junior Year:	0-5	6-10	10+

Note any honors classes or outstanding achievements for the applicant:

Describe any special and/or deserving qualities the applicant possesses:

---

School Official's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

School Official's Name: \_\_\_\_\_

High School (Name//District): \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Copy of high school transcript must be received by April 5, 2019 (may also be emailed) to the address below

Attn: Cristina Windover, VSPMA Scholarship Committee  
1002 C Sycolin Rd SE, Leesburg, VA 20175 Email: Cristina.Windover@lcps.org

### **All Applicants**

3 Letters of Recommendation must be received no later than April 5, 2019.

- Letters may be included as part of the application packet or mailed/emailed separately
- One recommendation must be from a member of Facilities, Maintenance, or Custodial Staff from your school or school division.
- If the applicant is a post secondary student who is a Virginia resident attending school out of state the recommendation may come from staff at the post secondary institution he or she is attending.

Letters may be mailed or emailed to

Attn: Cristina Windover, VSPMA Scholarship Committee  
1002 C Sycolin Rd SE, Leesburg, VA 20175

Email: [Cristina.Windover@lcps.org](mailto:Cristina.Windover@lcps.org)

**All Applicants**

III. In a brief statement describe why you want to be a recipient of the VSPMA Scholarship; the course of study and major you plan to follow; your proposed occupation or profession; and what you want to accomplish upon completion of your studies

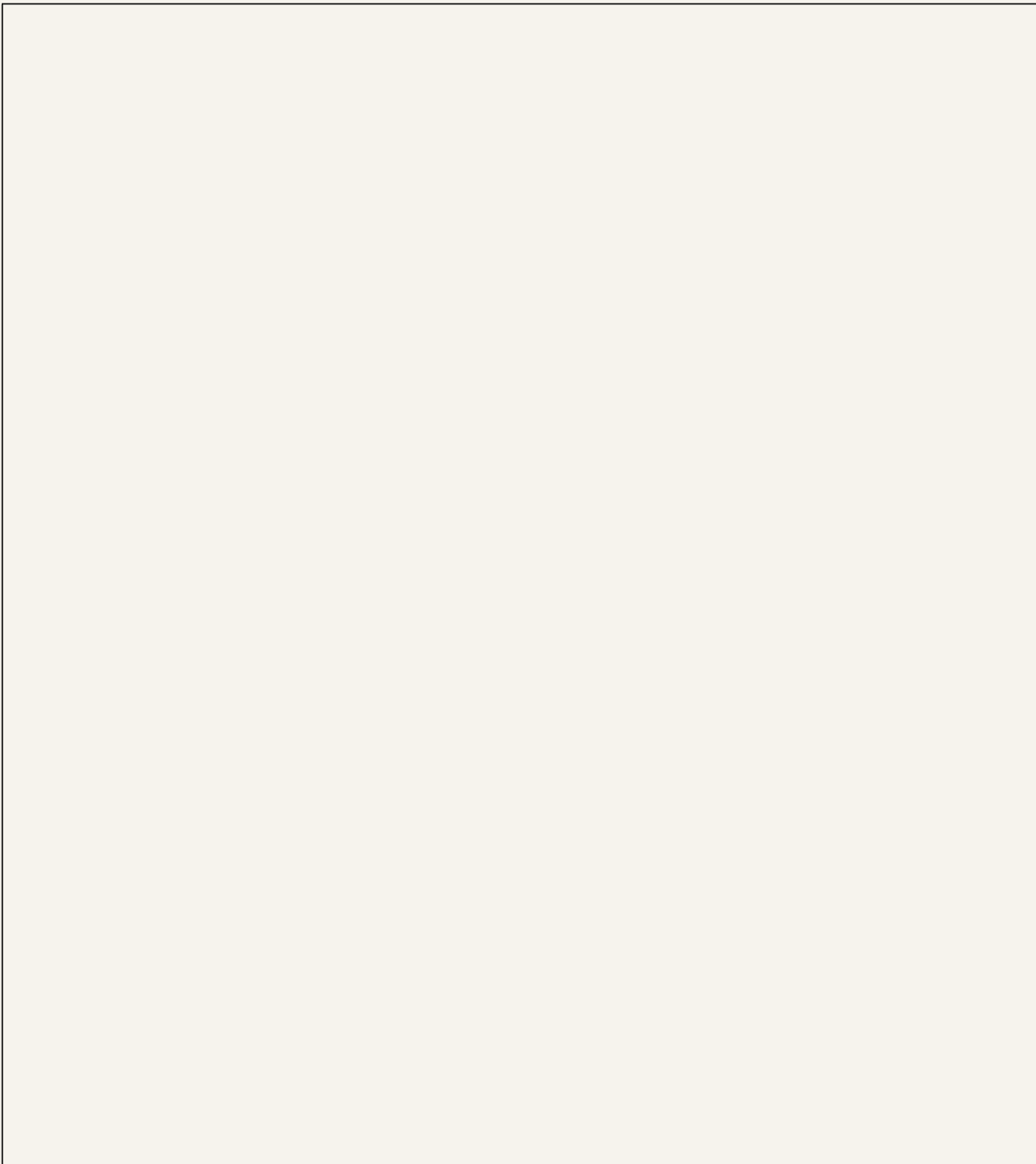
[Empty text box for response]

IV. **All Applicants**

ESSAY: In the space provided below (or submit as an attachment), please elaborate on the following essay topic in 250 words or less:

**Please describe how a clean, well-maintained, and safe school environment makes a difference in a student's education and impacts student achievement.**

The sponsors of this scholarship program currently hold or are retired from school personnel positions in custodial, maintenance, or operational services.

A large, empty rectangular box with a thin black border, intended for the applicant to write their essay response to the prompt above.

**Verification of Enrollment**  
**(Current Post Secondary Students Only)**

Dear Admissions/Registrar:

This student is applying for a scholarship from the Virginia School Plant Managers Association (VSPMA). Please complete the information requested below for verification of the student's acceptance to this academic institution.

In addition, please verify the student's current enrollment status and total number of hours completed. This information should be included in the student's scholarship application package. Thank you.

---

To be completed by the student:

I authorize the above requested information to be released to the VSPMA with my application for a scholarship.

---

Student/Applicant	Date
-------------------	------

---

Academic Institution

---

To be completed by Admissions/Registrar:

---

Student/Applicant	Academic Institution
-------------------	----------------------

Date of Acceptance of this Institution:

---

Is this student currently enrolled?

---

Is this student full time or part time?

---



<b>VSPMA REGION LIST</b>
--------------------------

**Region 1**

Charles City County  
 Chesterfield County  
 Colonial Heights  
 City  
 Dinwiddie County  
 Goochland County  
 Hanover County  
 Henrico County  
 Hopewell City  
 New Kent County  
 Petersburg City  
 Powhatan County  
 Prince George  
 County  
 Richmond City  
 Surry County  
 Sussex County

**Region 2**

Accomack County  
 Chesapeake City  
 Franklin City  
 Hampton City  
 Isle of Wight County  
 Newport News City  
 Norfolk City  
 Northampton County  
 Poquoson City  
 Portsmouth City  
 Southampton  
 County  
 Suffolk City  
 Virginia Beach City  
 Williamsburg-James  
 City County  
 York County

**Region 3**

Caroline County  
 Colonial Beach  
 Essex County  
 Fredericksburg City  
 Gloucester County  
 King George County  
 King William County  
 King and Queen  
 County  
 Lancaster County  
 Mathews County  
 Middlesex County  
 Northumberland  
 County  
 Richmond County  
 Spotsylvania County  
 Stafford County  
 West Point  
 Westmoreland  
 County

**Region 4**

Alexandria City  
 Arlington County  
 Clarke County  
 Culpepper County  
 Fairfax City  
 Fairfax County  
 Falls Church City  
 Fauquier County  
 Frederick County  
 Loudoun County  
 Madison County  
 Manassas City  
 Manassas Park City  
 Orange County  
 Page County  
 Prince William  
 County  
 Rappahannock  
 County  
 Shenandoah County  
 Warren County  
 Winchester City

**Region 5**

Albemarle County  
 Amherst County  
 Augusta County  
 Bath County  
 Bedford City  
 Bedford County  
 Buena Vista City  
 Campbell County  
 Charlottesville City  
 Fluvanna County  
 Greene County  
 Harrisonburg City  
 Highland County  
 Lexington City  
 Louisa County  
 Lynchburg City  
 Nelson County  
 Rockbridge County  
 Rockingham County  
 Staunton City  
 Waynesboro City

**Region 6**

Alleghany County  
 Botetourt County  
 Covington City  
 Craig County  
 Danville City  
 Floyd County  
 Franklin County  
 Henry County  
 Martinsville City  
 Montgomery County  
 Patrick County  
 Pittsylvania County  
 Roanoke City  
 Roanoke County  
 Salem City

**Region 7**

Bland County  
 Bristol City  
 Buchanan County  
 Carroll County  
 Dickenson County  
 Galax City  
 Giles County  
 Grayson County  
 Lee County  
 Norton City  
 Pulaski County  
 Radford City  
 Russell County  
 Scott County  
 Smyth County  
 Tazewell County  
 Washington County  
 Wise County  
 Wythe County

**Region 8**

Amelia County  
 Appomattox County  
 Brunswick County  
 Buckingham County  
 Charlotte County  
 Cumberland County  
 Greenville County  
 Halifax County  
 Lunenburg County  
 Mecklenburg County  
 Nottoway County  
 Prince Edward  
 County