



## TAAR SCHOLARSHIP APPLICATION

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### Dear Applicant:

The Tehachapi Area Association of REALTORS® recognizes the importance of higher education and the impact it has on the future of our community and on our families. So, we applaud you for taking steps to further your education by applying for our scholarship program. Please take a moment to review the required criteria for submitting your application. Incomplete applications may be disqualified.

### Vision and Purpose

Supporting higher education for local students, encouraging academic excellence in young adults pursuing a career in the Real Estate field, including but not limited business finance and law.

### Minimum Applicant Qualifications

All applicants must meet the following minimum qualification. See the scholarship application for additional details.

- Be a legal resident of California and live in the Tehachapi area.
- Be a full-time high school student in Tehachapi.
- Hold a valid California Driver's License or California State Identification Card
- Submit a typed essay up to 300 words.
- Submit a completed Tehachapi Area Association of REALTORS® Scholarship Application. Use of any other application other than this application will be grounds for disqualification.
- Deadline for Application submission is Monday, March 11, 2019 at 4:00 p.m.

### Mail or completed application to:

TAAR Scholarship Program  
803 Tucker Road,  
Tehachapi, CA 93561

Questions contact: (661) 822-7652, [taar@tehachapiaor.com](mailto:taar@tehachapiaor.com)



### **Scholarship Application Guidelines/Use as checklist**

The following must be submitted with Application to be considered complete.

- Student must be a senior from a local high school anticipating graduation in the current year.
- Applicant must have maintained and documented a cumulative grade point average of 3.5
- Proof of enrollment: Application must be accompanied by a copy of applicant's official transcript from the accredited high school.
- Verified acceptance letter showing enrollment at an accredited college or university for the current semester or quarter for which the scholarship will be provided.
- The completed application form must be in our office by 4:00 p.m., on Monday, March 11, 2019. All parts of the application must be completed and submitted with all recommendations to be considered. Late submissions will not be reviewed.
- A typed, 300-word essay about you, your career goals and objectives, and the benefits to be gained from this financial award.
- Applicant must be a resident of Tehachapi area for at least one year and have a valid California Driver's License or California State Identification Card.
- Three letters of recommendation are required (letter of recommendation form included). At least two must be academic recommendations and the third may be academic and/or a personal recommendation.

### **Award Amount**

The number and value of scholarships is determined each year by the scholarship committee. Awards are dependent on the amount of contributions made and the number and quality of applicants. In recent years, the Tehachapi Area AOR has awarded up to six scholarships ranging in value from \$500 to \$1000.



## Application Form

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Type or use black or blue ink only. **Print neatly.** Attach additional sheet(s) if space is needed.

### Section A - Applicant's Identification Information

Name: \_\_\_\_\_ Phone Number \_\_\_\_\_

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

E-Mail: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ California Driver's License Number \_\_\_\_\_

### Section B - Applicant's Education Information

What is your current grade Level \_\_\_\_\_ When will you graduate \_\_\_\_\_ ?

List all high schools that you have attended. Begin with the high school you are currently attending.

Name of High School	From	To

What is your degree objective?  Certificate  Associates (A.A)  Bachelor (B.A)

Date you expect to complete this objective: Month: \_\_\_\_\_ Year: \_\_\_\_\_

In which specific field are you planning your career? \_\_\_\_\_

How did you learn of the Tehachapi Area AOR Scholarship? \_\_\_\_\_

**Section C - Applicant's Extracurricular Activities**

(Attach separate sheet if additional space is needed)

School & Community Clubs/Activities Sports:

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Honors, Awards & Recognitions: \_\_\_\_\_

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**Section D - Recommendations**

Three recommendations are required. At least two must be academic recommendations and the third may be academic or a personal recommendation. Please use letter of recommendation form provided.

By signing this application, I certify that all the information I have provided is true and correct.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR OFFICE USE ONLY**

Date Application Received: \_\_\_\_\_ Reviewed for Completion by: \_\_\_\_\_

Comments: \_\_\_\_\_



## Letter of Recommendation Form

Type or use black or blue ink only. Print neatly (Please make copies of this page as three recommendations are required)

Applicant's Name: \_\_\_\_\_

Your evaluation of the applicant will help with the Scholarship Committee's selection process.

How long have you known the applicant? \_\_\_\_\_ In what capacity:     Classroom Contact

Other (please explain) \_\_\_\_\_

Co-curricular Activities: \_\_\_\_\_

Personal Friend

Compared to others you have known in this capacity; how would you rank the applicant's performance?  
       \_\_\_\_\_ Top 1%    \_\_\_\_\_ Top 5%    \_\_\_\_\_ Top 10%    \_\_\_\_\_ Top 25%    \_\_\_\_\_ Below 50%

Please **CHECK** the appropriate evaluation:

	Extraordinary	Outstanding	Above Average	Average	Below Average	Cannot Judge
Ability to communicate orally						
Ability to communicate in Writing						
Creativity						
Motivation						
Perseverance						
Organization						
Problem Solving						
Responsibility						
Integrity and Professional Ethics						

On reverse of this page or in a separate letter, please add any additional information you feel should be considered for this scholarship.

Name: \_\_\_\_\_ Title: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Signature: \_\_\_\_\_