



Assessment Institute in Indianapolis Scholarship Application

The purpose of this scholarship is to provide funds to support the professional development activities in assessment for full-time faculty and staff at institutions of higher education in the state of Arkansas. The amount of scholarship for 2019 is \$1,000.00. Funds must be used toward the cost of attending the Assessment Institute in Indianapolis on October 13-15, 2019. Follow this link to the Assessment Institute web page for more information about the conference. **Assessment Institute** in Indianapolis

Scholarship is awarded based on:

- Ability to apply the knowledge gained from Assessment Institute's workshops and sessions in the applicant's career field.
- Applicant's commitment to make a presentation about their experience at the AAACL Spring Conference held the year following attendance.
- Applicant is a full-time employee at a higher education institution recognized by the Arkansas Higher Education Coordinating Board at the time the Assessment Institute is held.
- Applicant's institution is a member of the Arkansas Association for the Assessment of Collegiate Learning (AAACL) at the time the Assessment Institute is held.
- Financial commitment of the applicant's institution to provide supplemental funding for the conference attendance.

A completed application package must include the following:

- Completed application form submitted by **September 6, 2019**.
- Submit completed application package via email to the Scholarship Application Committee at: AAACLorg@gmail.com. In the subject line enter: Scholarship Application 2019 - *your last name*

Applicant must submit a complete application package by the deadline to be considered for the scholarship. Applications received past the deadline will not be considered. Applicants will be notified of the scholarship decision via email.

Applicant Information

Date of Application: _____

Last Name: _____ First Name: _____

Job Title: _____ I am a full-time employee: _____

Institution Name: _____

Address: _____

City: _____ State: AR Zip: _____

Telephone: _____ Email: _____

Please provide a brief narrative addressing the following:

- Applicant's motivation for attending the Assessment Institute and the value applicant will gain from attending the Assessment Institute.
- How applicant plans to utilize the knowledge gained from attending the Assessment Institute.
- The value the applicant's institution will derive from the applicant's attendance.
- Applicant's commitment to make a presentation about their experience at the AAACL Spring Conference held the year following attendance at the Assessment Institute.

Signatures

Payment of the scholarship will be made directly to the recipient's institution once documentation of attendance at the Assessment Institute in Indianapolis is submitted to the AAACL Treasurer.

Verification: *I certify that _____ supports the application of _____ for the AAACL scholarship to attend the Assessment Institute in Indianapolis. I further understand that this scholarship will reimburse \$1,000.00 of the incurred expenses and that _____ will provide funding for the balance of conference expenses.*

Applicant: _____ Date: _____

Title: _____

Assessment Leader: _____ Date: _____
(If different than the Applicant)

Title: _____

Budget Supervisor: _____ Date: _____

Title: _____

Committee Use Only

Date Received: _____ Application package complete: Yes No

Award: _____