



Florida Educational Risk Management Association (FERMA) Scholarship Criteria

The scholarship is provided to active FERMA Educational Members, their spouse, children or grandchildren with financial assistance, while pursuing a degree full-time or part-time. The degree must be from an accredited institution of higher learning leading to an Associate, Bachelor or Masters degree.

The scholarship is \$500.00. Up to four individual scholarships will be awarded annually. An individual may re-apply annually and receive a scholarship award each year up to the receipt of a degree provided all application requirements have been met. Requirements may change from year to year.

1. Applications must be received by the FERMA Board no later than May 1, of the application year.
2. Applications must be submitted to the current FERMA President – Only e-mail PDF copies with applicant signature will be accepted.
3. The Board will review all applications and approve any awards by at least a two thirds vote of the Board.
4. The awards will be announced at the Summer FERMA Conference.
5. Preference will be given to applicants considering study in Risk Management related fields.

Form Letter from FERMA
Copy School



Florida Educational Risk Management Association (FERMA) Scholarship Application

Section 1: Student Information

Name: _____ Male ___ Female ___

Permanent Address: _____

City: _____ State: _____ Zip: _____

Contact Phone Number: _____ E-mail: _____

High School Name: _____ Address _____

City: _____ State: _____ Zip: _____ Phone: _____

FERMA Member Name/Relationship: _____

Section 2: College Information

College Name: _____

City/State: _____

Planned Graduation Date: _____

Have you previously received a FERMA Scholarship: Yes ___ No ___

Part Time (3-11 hours): ___ Full Time (12+ hours): ___

Degree: Associate ___ Bachelor ___ Masters ___

Degree Program: _____

Section 3: Award Requirements

On a separate sheet, please complete the following in 300 words (or less) and attach to your application.

1. Describe why you believe you should be awarded this scholarship (i.e., career goals, financial need, etc.)

Signature: _____ Date: _____

Must be completed if currently enrolled in College

A. Faculty Member Name: _____ Title: _____

Institution: _____

Department: _____

Address: _____

City: _____ State _____ Zip: _____ Daytime Phone #: _____

Fax: _____ Email: _____

B. Certification:

I certify that applicant _____ is currently in a degree seeking program, and specifically includes verification of official enrollment and verifies 12 current semester hours or more (undergraduate applicants), or 9 current semester hours (graduate applicants), or at least 3 semester hours (part time students) and verifies that the student is in good academic standing.

C. Attach Letter of Recommendation: Indicate candidate's strong points and why you feel he/she should receive an award.

Signature: _____ Date: _____

E-Mail completed application with attachments in PDF format with Applicant Signature no later than May 1 of the Application Year to:

**President, FERMA
WWW.FERMASITE.ORG**

AWARD RECIPIENTS WILL BE NOTIFIED AT THE FERMA SUMMER CONFERENCE