**Instructions:**

Submitting a resume does not replace any part of this application. If the space provided below is inadequate, please use additional sheets. Attachments must follow the same format.

In addition to this signed application, candidates must also provide the following:

* Proof of academic standing, including current grade point average
* Professional resume summarizing education, work and volunteer experience
* A 500-word essay on one of the following topics:
  + Diversity and Inclusion in the Workplace
  + HR Trends (you may focus on one or more current HR trends for your essay)
* A 100-word explanation of your interest in HR and how you would benefit from this scholarship.

Academic Award selection is based on a variety of factors, including but not limited to:

* Academic achievements
* Extracurricular activities
* Leadership roles
* Essays
* A personal interview, if necessary

Applications should be submitted by email no later than November 21, 2021. Please submit applications to:

**Jamie Rofkar, Student Relations Chair**

**Northwest Ohio Human Resources Association**

**Email:** [**studentrelations@toledoshrm.org**](mailto:studentrelations@toledoshrm.org?subject=Roger%20Elrod%20Education%20Award)

Additional information on the Education Award program can be found at [www.toledoshrm.org](http://www.toledoshrm.org). Please direct questions to the Student Relations Chair at [studentrelations@toledoshrm.org](mailto:studentrelations@toledoshrm.org?subject=Roger%20Elrod%20Education%20Award).

**Personal Information**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Last Name: | |  | | | | | | | First Name: | | | |  | | | | MI: | |  |
| Permanent Mailing Address: | | | | | |  | | | | | | | | | | | | | |
| City: |  | | | | | | | | | State: | |  | | | Zip Code: | | |  | |
| Primary Phone: | | | ( |  | ) | |  | - |  | | Email Address: | | | | |  | | | |
| Have you received a scholarship from NOHRA in the past? | | | | | | | | | | | | | | Yes No | | | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Are you a SHRM Member? | Yes No | | |
| Do you belong to a local SHRM chapter? | | Yes No | |
| Do you belong to a student SHRM organization? | | | Yes No |

|  |  |
| --- | --- |
| Current position and employer (*if employed*): |  |

**Secondary Education**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Name Of Institution: | |  | | | | | |
| City: |  | | | State: |  | Zip Code: |  |
| Graduation Date (Month And Year): | | |  | |

**Post-Secondary Education**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name Of Institution: | |  | | | | | | | |
| City: |  | | | | State: |  | | Zip Code: |  |
| Major/Course Of Study: | | |  | | | | | | |
| Currently Enrolled? | | Yes  No | | Years Attended: | | |  |  | |
| Did You Graduate? | | Yes  No | | Degree Earned: | | |  | | |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name Of Institution: | |  | | | | | | | |
| City: |  | | | | State: |  | | Zip Code: |  |
| Major/Course Of Study: | | |  | | | | | | |
| Currently Enrolled? | | Yes  No | | Years Attended: | | |  |  | |
| Did You Graduate? | | Yes  No | | Degree Earned: | | |  | | |

**Activities, Awards & Honors**

List activities in which you have participated in during the past four years (e.g. student government, music, sports, professional memberships, etc.). List community activities in which you have participated in without pay during the past four years (e.g. Boy/Girl Scouts, hospital volunteering, Special Olympics, etc.).

|  |  |  |
| --- | --- | --- |
| Activity | No. Years Participated | Special Awards/Honors |
|  |  |  |
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**Professional Leadership Roles**

Please indicate all activities in which you have participated in during the past four years that directly relate to your major or the HR profession. Include leadership roles that you have accepted.

|  |  |  |
| --- | --- | --- |
| Activity/Organization | No. Years Participated | Leadership Position |
|  |  |  |
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**Acknowledgement**

*I hereby certify that the information provided is accurate to the best of my knowledge and belief. I understand that any falsification of the information provided will automatically forfeit eligibility.*

|  |  |  |  |
| --- | --- | --- | --- |
| Signature: |  | Date: |  |