

BROADCAST SCHOLARSHIP PROGRAM

Sponsored By



Broadcasters

Bringing Community Service Home

Deadline for Application: March 5, 2009

Louisiana Association of Broadcasters
660 Florida Street
Baton Rouge, LA 70801
225.267.4522

LOUISIANA ASSOCIATION OF BROADCASTERS' SCHOLARSHIP APPLICATION

The Purpose

By endorsing quality education for potential broadcasters, the members of the Louisiana Association of Broadcasters believe that they are guaranteeing the future of quality broadcasting in Louisiana. Toward that goal, the Louisiana Association of Broadcasters has established a scholarship fund aimed at the higher education of promising students. The purpose of that scholarship fund is multifold.

- To encourage a higher standard of professionalism in the industry;
- To foster a stronger relationship between higher education and the profession;
- To promote a greater understanding of journalistic ethics and the societal responsibility of broadcasters;
- To support potential and commitment in promising future broadcasters.

The Scholarship

The Louisiana Association of Broadcasters will make available up to \$4000 annually, two individual scholarships equivalent to \$1000.00 per semester for one year, in scholarship awards to students enrolled and attending classes, fulltime, in a fully accredited broadcast curriculum at a Louisiana four year college. In order to confirm eligibility, winners will be required to provide LAB with documentation verifying enrollment status, as well as a copy of grades from the previous semester - to ensure recipient meets grade point average requirements.

Application Procedure

Complete the application form, attaching all additional sheets necessary and forward it to the LAB office.

**LAB - Scholarship Committee
660 Florida Boulevard
Baton Rouge, LA. 70801**

To be considered for the upcoming school year, all applications must reach the LAB Office by 5 p.m. on March 5, 2009.

Selection Criteria

Applicants must:

- Have a Louisiana home address;
- Submit up to three letters of recommendation from a college professor, broadcaster and/or other business person;
- Be enrolled and attending classes, fulltime, in a fully accredited broadcast curriculum at a Louisiana four year college;
- Maintain a minimum 2.5 GPA;
- Be classified as a Junior or Senior;
- Have the application signed by a college radio/TV department head or broadcaster certifying that the applicant meets the criteria.

Financial need may be considered; applicants are asked to indicate how their college education is being funded.

Industry need for sales/marketing, engineering and graphics professionals will be considered when selecting the winners.

Judges will consider the depth of thought, the clarity of expression and the commitment to broadcasting as primary. Extracurricular activities and community involvement will also be considered.

Scholarships will be awarded prior to the end of the Spring semester.

Previous LAB Scholarship Award winners are eligible.

The Sponsor

The Louisiana Association of Broadcasters has a keen interest in the excellence of broadcast education. Consistent with this goal, and to lend tangible support, the LAB has established this scholarship program to encourage students of the highest caliber to enter broadcasting as a career and to seek the best quality of education in the field. We sincerely want to see broadcasting as a profession today passed on to qualified, outstanding men and women.

The scholarship program reflects the LAB's commitment to the principal of non-discrimination. No applicant will be discriminated against on the basis of race, religion, national origin, gender or age.

SCHOLARSHIP APPLICATION

Return by March 5, 2009 to:

Scholarship Committee
Louisiana Association of Broadcasters
660 Florida Boulevard
Baton Rouge, LA. 70801

Attach up to three letters of recommendation from a College Professor, Broadcaster and/or other business person. Attach the essay requested under the section entitled "YOUR CAREER".

NAME _____ SOCIAL SECURITY # _____

TELEPHONE # _____ EMAIL ADDRESS _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

Overall GPA(if available) _____ Broadcast GPA _____

Number of college credits earned _____ Broadcast Credits earned _____

Grade level during the coming academic year _____

Major/degree working toward _____

Expected date of graduation _____

How is your college education being funded? _____

YOUR SCHOOL

School Attending _____

Address _____ City _____ State _____ Zip Code _____

Name & Title of Department Head or Advisor _____

Department Address _____

Department Telephone # _____

YOUR ACTIVITIES

What part-time work, if any, have you done while attending school? _____

What other scholarships or student aid do you receive? _____

List your academic honors and other accomplishments: _____

List college and community activities and clubs in which you have participated; specify offices held where appropriate: _____

YOUR CAREER

Please submit up to three typewritten pages(double-spaced) addressing the following;

Why did you select broadcasting as your career choice?

What specific area of broadcasting most interests you and why?

What is your first job preference after college?

What is your career goal ten years after graduation?

What is your eventual career goal?

In what broadcast activities have you participated?

How do you feel about broadcast advertising and its importance to a station?

How do you feel about broadcast advertising and its obligation to consumers?

How do you think broadcasting could better serve society?

Describe the radio or television station you respect most.

How might your college career improve your value as a broadcaster?

Describe your most rewarding broadcast-related experience.

I certify that the information I have given on this application and attachments is true and correct to the best of my knowledge.

Applicants Signature

Date

DEPARTMENT HEAD CERTIFICATION (IF AVAILABLE)

I certify that this applicant meets the scholarship criteria as it relates to Louisiana residency, GPA, credits earned, major and grade level.

Name _____
(please print)

Title _____

Signature _____

Date _____