

Virginia Association for Health, Physical Education, Recreation and Dance
GRADUATE AWARD
OFFICIAL APPLICATION FORM
7.19993

1. Candidate=s Name _____
Address _____ Zip _____
Home Telephone Number _____ E-mail _____
Current Membership NumberVAHPERD _____ AAHPERD _____
2. Educational Background _____

3. College or university where presently enrolled _____
4. Course of study in which you are enrolled _____
5. Name, title, and address of program advisor _____

6. Professional affiliations and activities (e.g. membership in professional organizations, offices held, etc.)

7. Honors and awards received _____

8. Services to the community and school _____

9. Significant achievements in the field of health, physical education, recreation, or dance

10. Attach one letter of recommendation from a graduate faculty member.
11. Attach supplemental information if necessary.
12. Criteria:
 - a Masters or Doctoral Student.

- b VAHPERD Member prior to the Award.
- c Exhibit academic or service excellence.