

JOSEPH ADAMS SCHOLARSHIPS FOR HIGH SCHOOL SENIORS



2025-2026 APPLICATION SIGNATURES FORM

| Student Name | School |
|--|--|
| Chapter Name | City |
| Personal email address | State Zip |
| | Sponsor(s) |
| By signing below, I acknowledge that the essay and video I am submitting is my own original work . I understand that my work may be subject to an Artificial Intelligence detection tool. | |
| Signature of student: | |
| CHAPTER SPONSOR CERTIFICATION | |
| As a sponsor of Capítulo | located in Region of the |
| Sociedad Honoraria Hispánica, I certify that all SHH sponsors ar | nd co-sponsors in my school are members in good |
| standing of the American Association of Teachers of Spanish and Portuguese for the 2026 calendar year. I understand | |
| that failure by any sponsor or co-sponsor to be a 2026 member invalidates my student's application. The student named | |
| on this application is a senior and was initiated on | , 20 By signing this form and |
| submitting the application electronically, I verify that the essay | submitted is the original work of the applicant as it is |
| consistent with the work they typically submit in class. | |
| Signature of Sponsor | |

Visit www.aatspshh.org/statedirectors to see your state's region.

NOTE: For complete details about the application materials, consult the Joseph Adams Scholarships for High School Seniors Information for 2025-2026 available at www.aatspshh.org.

SUBMISSION PROCEDURE

- The chapter sponsor is responsible for submitting the complete student application form and support materials. *REMINDER:* Each chapter is allowed to send in only one application.
- Failure to follow submission procedures may result in the disqualification of the applicant.
- The deadline for receipt is **Tuesday, December 9, 2025, at 11:59PM (Eastern Time).**
- All applications will be acknowledged. If you do not receive a message acknowledging receipt of the application, contact the AATSP National Office at SHH@aatsp.org

