

GAWDA 2018 SCHOLARSHIP APPLICATION PACKAGE

Managed by GAWDA One Oakwood Blvd, Suite 195 Hollywood, FL 33020

GAWDA Foundation Scholarship



Introduction

The GAWDA Foundation Scholarship was created in 2011 for the purpose of providing support to recipients during their formal education. The amount available varies from year to year.

The GAWDA Foundation Scholarship is available to children and employees of active GAWDA member companies. The goal of the GAWDA Foundation is to promote education within the Gases and Welding Industry. Therefore, the Trustees make the decisions regarding use and distribution of the funds available.

<u>Eligibility</u>

The GAWDA Scholarship will be awarded to children and employees of active GAWDA member companies. All applicants must meet the following eligibility requirements (the requirements listed are just for your consideration). The selection committee should review these sample requirements and include additional requirements you feel will establish your desired applicant pool.

- 1. Applicant must be a minimum of eighteen years of age.
- 2. Applicant must have at least a high school diploma or GED.
- 3. Applicant must have a "2.5" overall grade point average if pursuing a degree program.
- 4. Applicant must provide a letter of reference indicating how they will use their related education. Preference is given to Industry related careers.
- 5. Student may be enrolled full time or part time.

Applicant must submit all required application information

- 8. Applicant must be a citizen or legal resident of the United States and plan to attend an academic institution located within the United States.
- 9. Applicants may reapply. Persons who have received this award may reapply for future consideration.
- 10. Persons may not be considered if the GAWDA company membership lapses.

The Foundation does not discriminate by age, race, color, national origin, disability, creed, or gender.

2017 Awards - This year, there are 12 awards of \$2,000 for selected GAWDA recipients.

All awards are for tuition fees only

• All other awards may be paid to the recipient only after proof of successful course completion and receipt of payment made to the academic institution.

GAWDA Foundation Application Information

Procedure

Applicant must submit the following:

- 1. Application (form)
- 2. A letter of reference **from the GAWDA member company** documenting employment experience and/or relationship to GAWDA Member Company.



3. Personal Statement (should be 300-500 words in length, typewritten, and double-spaced) documenting your ambitions, goals, leadership, and any other factors to assist the committee in judging your eligibility.

Other factors you may want to highlight:

- Demonstrated timeliness and completion of assignments
- Creativity in solving problems
- Demonstrated responsibility on own initiative
- Ability to work well with others
- Organizational skills (ability to handle multiple tasks, time management)
- Participation in class, campus and outside organizations
- General Background information
- Career Objectives
- 4. Original Official Transcript(s) sent directly from the college or university: high school students entering their first year program must provide an original official high school transcript.

Consideration for "Financial Need"

- 1. Statement of Unmet Financial Need completed by an accredited academic institution even if no FAFSA was filed
- 2. Verification of Enrollment completed by college or university

Please note: Recipients will be asked to submit a 5 x 7 head and shoulders color photograph for publicity purposes.

Deadline

Deadline for application is February 16, 2018.

For More Information

Please contact:

GAWDA One Oakwood Blvd., suite 195 Hollywood, Florida 33020 954-367-7728, extension 230 Fax – 954-367-7790



GAWDA Foundation Scholarship Application

Deadline for Submission: Postmarked by February 16, 2018			n To: od Boulevard, Suite 19: Florida 33020	5			
Student ID Number	GAWD	A Member Compa	any				
Applicant's Name	Email address						
Current Address	Street	Apt. No.	City	State	Zip		
Home Phone Number ()	Are	you at least 18 yea	urs of age? i	f no, please give	your age		
Are you a U. S. Citizen? Yes No	If no, a	re you a legal US	resident? Yes	No			
Are you employed? Yes No	If yes, pl	ease give the follo	wing:				
Employer's Name		Employe	er's Phone Number	.()			
Employer's Address	Street	Apt. No.	City	State	Zip		
Parent/Guardian's Name(If under 18 years of age)	Parent/Guardian's Phone ()						
Parent/Guardian's Address	Street	Apt. No.	City	State	Zip		
Parent/Guardian's Employer					Zip		
Employer's Address							
Number	Street	Apt. No.	City	State	Zip		
NAME OF COLLEGE OR UNIVERSI	ТҮ						
Address							
Number Street			City	State	Zip		
Contact at College/University		Pl	none Number ()			
Proposed Major Area of Study			Expected I	Date of Graduati	on		
I affirm the information that I have (will) I true to the best of my knowledge. I under financial aid at some later date.							
Signature of Applicant				Date			
Signature of Parent or Guardian	If under 18 years of age Date						



LIST OF SCHOOLS YOU PREVIOUSLY ATTENDED (From High School through the Present)

*** Attach a transcript from all previous institutions attended ***

WORK EXPERIENCE (Include present and previous employment, and use additional paper if required)

FINANCIAL AID REPORT (List previous and current educational scholarships, grants, loans, work-study, or student employment.) Attach a copy of your Student Financial Aid Form even if no financial aid was received.

LIST OF PERSONAL REFERENCES:

Name Street/City/State/Zip Occupation

PERSONAL STATEMENT – Attach a supplementary sheet to give information about your ambitions, goals, background, leadership, and any other factors that would assist the committee in judging your eligibility. (300-500 words)



Verification of Enrollment

Dear Admissions/Registrar:

This student is applying for a scholarship from the Gases and Welding Distributors Association. Please complete the information requested below for verification of the student's acceptance to this academic institution.

In addition, please verify the student's current enrollment status and total number of hours completed. This information should be included in the student's scholarship application package. Thank you.

GAWDA

To be completed by Student:

I authorize the above requested information to be released to GAWDA in connection with my application for a GAWDA Foundation Scholarship.

Student	Academic Institution				
Student ID Number	Date	2			
To be completed by Admissions,					
Student Academic Institutio					
Date of Acceptance to this Instit	ution:				
Is this student currently enrolled	?	Is the	student part	time or full	time?
Course of study currently enrolle	ed:				
Number of Academic Hours Cor	npleted:				
Student State: (circle one) Fres	shman	Sophomore	Junior	Senior	Other
Signature		Titl	e		
Print Name		Tele	phone ()	



To be completed by Office of Financial Aid:

Student Name	Academic Institution	Academic Year		
Expected amount of financial nee	d:			
Tuition & Fees \$	Room & Board	\$		
Estimated Academic & Personal 1 (Books, Tools, Supplies, Travel)				
TOTAL \$				
Financial Aid:				
Did student file for FAFSA? Yes	No			
Personal/family contribution expe	ected \$			
Scholarships \$	Grants \$_			
Loans \$	Work Study \$_			
Other \$				
TOTAL \$				
Total Amount of Expected Unm	net Financial Need \$			
Signature Title				
In case of questions, please contact	ct:			
Telephone (Date			