2011
FULL-TIME STUDENT
SCHOLARSHIP APPLICATION

For Candidates Pursuing a Degree in Civil Engineering,
Environmental Engineering, or Public Works
Management

ADDITIONAL INFORMATION TO BE SUBMITTED WITH APPLICATION

A. Submit a copy of a transcript of your college level grades.

B. List the courses you are presently taking, along with a brief description of each.

C. Attach a reference letter from the reference listed in of the application.

D. Provide a Career Goals and Needs description as outlined below.

Please answer the following questions accurately and honestly on a separate sheet of paper. Label the paper "Career Goals and Needs Description" and attach to this application.

1. Describe your field of study or your anticipated degree program and detail the type of employment you expect to find in a Public Works organization due to your educational background. Include your minor course of study, if any.

2. Describe challenges you expect to face in a Public Works career and why you have selected a career in Public Works?

3. Is there any other pertinent information about your career or educational aspirations that should be taken into consideration (i.e., would your proposed academic program include any study or research which may be suitable for publication and serve to benefit the profession)?

Scholarship applications must be received by mail, e-mail, or fax by April 1, 2011
# 2011 FULL-TIME STUDENT SCHOLARSHIP APPLICATION
## GENERAL INFORMATION FORM

### CANDIDATE INFORMATION

<table>
<thead>
<tr>
<th>NAME</th>
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<tbody>
<tr>
<td>HOME STREET ADDRESS</td>
<td>MAILING STREET ADDRESS (if different)</td>
</tr>
<tr>
<td>CITY, STATE</td>
<td>CITY, STATE</td>
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<td>ZIP CODE</td>
<td>ZIP CODE</td>
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<tr>
<td>HOME PHONE</td>
<td>ALT. PHONE</td>
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<td>EMAIL</td>
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### EMPLOYER INFORMATION (IF APPLICABLE)

<table>
<thead>
<tr>
<th>EMPLOYER</th>
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<tbody>
<tr>
<td>ADDRESS</td>
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<td>CITY, STATE, ZIP</td>
<td></td>
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<tr>
<td>PHONE</td>
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<tr>
<td>PART TIME?</td>
<td>FULL TIME?</td>
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<tr>
<td>POSITION/WORK DESCRIPTION</td>
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Are you in an employer sponsored tuition program?  [ ] Yes  [ ] No

If yes, provide details.
### FINANCIAL ASSISTANCE

Identify total scholarship need $__.____.

Please provide details on any financial programs from which you did or will receive monies. Please be specific.

### SCHOOL INFORMATION

**UNIVERSITY NAME**

**COLLEGE/PROGRAM NAME**

**DEGREE ANTICIPATED**  (Major)  (Minor)

**CURRENT GPA**

**TENTATIVE GRADUATION DATE**

**COLLEGE CONTACT (Dean/Counselor/Professor)**

<table>
<thead>
<tr>
<th>Name</th>
<th>Phone</th>
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### REFERENCE INFORMATION

**REFERENCE NAME**

**REFERENCE EMPLOYER**

**WORK ADDRESS**

**CITY, STATE, ZIP**

**WORK PHONE**

APWA CHAPTER & BRANCH AFFILIATION (if any)
EXTRACURRICULAR ACTIVITIES

Please provide details of your involvement in extracurricular activities. Attach additional pages, if necessary.

I certify that all the information submitted in this application to be true and correct. I further certify that neither I nor any member of my family is an officer, director or a member of the Lake Branch Scholarship Committee of the APWA, Chicago Metro Chapter.

Signed_______________________________ Date_________________________________

(Applicant)