

SALINA HOME BUILDERS ASSOCIATION  
2125 CRAWFORD PLACE  
SALINA, KS 67401

## SCHOLARSHIP APPLICATION

Date of Application \_\_\_\_/\_\_\_\_/\_\_\_\_  
20\_\_ to 20\_\_ School Year

**NAME** \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

PHONE NO \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

GRADE POINT AVERAGE \_\_\_\_\_

**QUALIFICATIONS:** The objective of our organization is to provide financial assistance to students for professional training in the building industry for such fields as: masonry, framing, trim carpentry, heating, plumbing, electrical, concrete work and other building fields. For consideration for a scholarship the applicant must meet the following specifications.

- Be a Citizen of the United States
- Document a financial need
- Furnish an up to date copy of your GPA
- Express intent to enter in a chosen field of the building industry in the state of Kansas upon completion of the course of study for which aid is requested.

## INSTRUCTIONS:

1. Carefully study the qualifications listed previously to determine your eligibility to be considered for financial assistance.
2. Complete this application form in full, accompanied by the following:
  - A typed statement of 250 words or less, which describes the development of your interest in your chosen field, your reasons for desiring further study, your plan of study, your career plans following completion of study and why you feel financial assistance is needed.
  - A transcript of grades and credits from the last three semesters
  - Notification of enrollment/acceptance from the educational institution to which you have applied or are enrolled at.
3. Applications MUST be received at the above address or postmarked by June 1<sup>st</sup> to be eligible for consideration for a scholarship for the following school year.

*Please note: All information contained in this application form and supporting documents are treated as confidential by the Scholarship Committee of the Home Builders Association of Salina.*

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### BIOGRAPHICAL DATA:

1. Date of Birth \_\_\_\_\_
2. Marital Status \_\_\_\_\_
3. Spouse's full Name \_\_\_\_\_
4. Occupation (Part time or Full time job) \_\_\_\_\_

### EDUCATIONAL DATA:

1. School(s) attended in the past:

School \_\_\_\_\_

City, State \_\_\_\_\_

Graduated: No \_\_\_\_\_ Yes \_\_\_\_\_

Major of Study \_\_\_\_\_

GPA \_\_\_\_\_

School \_\_\_\_\_

City, State \_\_\_\_\_

Graduated: No \_\_\_\_\_ Yes \_\_\_\_\_

Major of Study \_\_\_\_\_

GPA \_\_\_\_\_

2. Institution you will be attending during the upcoming school year:

School \_\_\_\_\_

City, State \_\_\_\_\_

3. Field of Study:

\_\_\_\_\_

4. Degree Sought:

\_\_\_\_\_

5. Class Status for this school year:

• 1<sup>st</sup> year student \_\_\_\_\_

• 2<sup>nd</sup> year student \_\_\_\_\_

6. Complete month/year for which you are requesting assistance.

\_\_\_\_\_

**FINANCIAL PLANNING:**

1. List known or estimated expenses for this school year: Dates \_\_\_\_\_ to \_\_\_\_\_

Tuition:  
\$ \_\_\_\_\_

Fees:  
\$ \_\_\_\_\_

Books & Supplies:  
\$ \_\_\_\_\_

Room and Board:  
\$ \_\_\_\_\_

**TOTAL EXPENSES \$ \_\_\_\_\_**

2. List known or estimated income for the upcoming school year:

Family (parents, spouse, etc.):  
\$ \_\_\_\_\_

Relatives or friends:  
\$ \_\_\_\_\_

Other Scholarships/Grants:  
\$ \_\_\_\_\_

Personal loans:  
\$ \_\_\_\_\_

Employment:  
\$ \_\_\_\_\_

Other:  
\$ \_\_\_\_\_

**TOTAL INCOME \$ \_\_\_\_\_**

3. Dependents:

Number of dependents that parents/guardian will claim in tax year for which the scholarship aid is being requested: \_\_\_\_\_

In the last tax year, was the applicant claimed as a dependent of a parent/guardian?

YES  NO

**IF SELF SUPPORTING STUDENT PLEASE FILL OUT THIS SECTION. IF NOT, PLEASE SKIP.**

1. *Incomes:*

*Applicant's gross income for the last tax year: \$* \_\_\_\_\_

*Spouse's gross income for the last tax year: \$* \_\_\_\_\_

**TOTAL INCOME: \$** \_\_\_\_\_

2. *During the school year for which scholarship assistance is requested, the applicant will:*

*RESIDE WITH FAMILY*

*RESIDE IN COLLEGE HOUSING*

*MAINTAIN A SEPARATE HOUSEHOLD*

3. *Dependents:*

*Number of dependents that the applicant will claim in the tax year for which the scholarship aid is being requested: \_\_\_\_\_*

4. *Other: – Anything else the applicant would like to state concerning income (Unusual circumstances or other financial obligations which effect applicant's need for financial assistance. Expand as needed in a narrative statement):*

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**EDUCATION LOANS:**

1. List educational loans awarded in previous years:

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2. List educational loans planned or already awarded for this application year:

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**SCHOLARSHIPS/GRANTS DATA:**

*(Note: We do not exclude applicants accepting other awards).*

1. List scholarships and grants awarded in previous years:

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2. List scholarships and grants applied for, or granted, for the period this application covers:

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**ACTIVITIES INFORMATION:**

1. List employment for past four years (Company, job function):

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2. List other work or volunteer experience related to your chosen field of the construction business:

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**ATTACHMENTS**

Attach three (3), letters of reference or recommendation from teachers, employers (past or present), or leaders of any organization that you are or have been a member of.

A typed statement of 250 words or less, which describes the development of your interest in your chosen field, your reasons for desiring further study, your plan of study, your career plans flowing completion of study and why you feel financial assistance is needed..

APPLICANTS SIGNATURE: \_\_\_\_\_

PARENT/GUARDIAN (IF A DEPENDENT)

SIGNATURE \_\_\_\_\_

Printed Name \_\_\_\_\_