

# THE FRSA EDUCATIONAL AND RESEARCH FOUNDATION'S SCHOLARSHIP APPLICATION FOR UNDERGRADUATE OR GRADUATE SCHOOL

The applicant is responsible for ensuring that all items listed below are submitted to the FRSA Educational Foundation and postmarked on or before *March 31, 2021*.

- 1. Complete and sign this application.
- 2. Include one reference letter completed by your high school guidance counselor, an instructor or college faculty; whichever is applicable. Other letters of recommendation will be considered.
- 3. Include the official high school or most recent college transcripts. These documents will not be returned.
- 4. Mail the application, letter and transcripts to:

# FRSA Educational & Research Foundation PO Box 4850 Winter Park, FL 32793

5. Incomplete applications *will not* be considered.

# Please type or print using black or blue ink. All sections must be completed.

#### **Applicant's Contact Information**

Name			
	(First, Middle and Last)		
Mailing Address			
City		State 2	Zip
Home Phone	Cel	I	
E-mail Address			
I will/have graduate(d) from	(Name of High School)		ON(Date of Graduation)
I plan to continue my education at _	(Name of College, Community C	college or University)	
My career choice/field of study is			
Age Marital Status		# of Dependents	# of Siblings
Number of siblings currently enrolle	d in college or vocational	school	
Please indicate which figure best de	escribes your family's adju	usted gross income:	
Under \$20,000	\$	21,000 to \$40,000	
\$41,000 to \$60,000	\$	61,000 to \$80,000	
Greater than \$80,000			

How did you	learn about	FRSA's Sch	nolarship	program(s)?
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Have you ever applied for a scholarship with FRSA?

If you are a previous FRSA Scholarship recipient, how has receiving the scholarship made a difference in your life?

Are you or your family a member of FRSA? \_\_\_\_\_

Are you considering a career in construction or a construction related field?

Are you currently em	1ployed?	Number of hours worked weekly	

Place of Employment \_\_\_\_\_

Duties of Employment:

#### Please answer the following questions using <u>only</u> the space provided.

How will a scholarship (under \$5,000) make a difference in your life?

Summarize your long-term career objectives.

#### Applicant's Education Information – for Graduating High School Students only

High School Class Rank	of	Currer	nt G.P.A	
SAT Score: o	r ACT Score:			
Name of College or Scho	ol you plan to attend			
In what program do you e	expect to earn your degree?			
Are you receiving other so	cholarships? (circle one)	YES	NO	
If Yes please provide:	Scholarship amount \$			
	Scholarship provider (Name	e)		

List the current/most recent extracurricular activities that you participated in while in high school and/or vocational school. Please include month and year of participation.

**Secondary or Post-Secondary Clubs** – (may include co-curricular, academic, service, leadership, fine arts and multi-cultural)

Personal Interests – (may include athletics, hobbies and passions)

Achievements - (may include awards, recognition and personal goals attained)

**Volunteer Experience** – (may include name of organization, if applicable, description of involvement and approximate total hours)

# Applicant's Education Information – for Existing College Students only

Current G.P.A.	
SAT Score: c	or ACT Score:
Name of College at which	n you are currently enrolled
In what program do you	expect to earn your degree?
Are you receiving other s	cholarships? (circle one) YES NO
If Yes please provide:	Scholarship amount \$
	Scholarship provider (Name)

List the current/most recent extracurricular activities that you participated in *while in high school and/or vocational school and any current post-secondary activities.* Please include month and year of participation.

**Secondary or Post-Secondary Clubs** – (may include co-curricular, academic, service, leadership, fine arts and multi-cultural)

Personal Interests – (may include athletics, hobbies and passions)

Achievements - (may include awards, recognition and personal goals attained)

**Volunteer Experience** – (may include name of organization, if applicable, description of involvement and approximate total hours)

# Parent or Guardian Information

Name	Employer, City
Mother	
(First and Last)	
Father(First and Last)	
Guardian	
(First and Last)	
List any immediate family members present	y employed within the construction or roofing industry.
Name	Relationship
Employer	Position in Company
City, State	
Name	Relationship
Employer	Position in Company
City, State	
Thursday, July 22, 2021 in Kissimmee? (circle o	you be willing to send a follow-up report of your progress and
Scholarship Committee. I understand that docu	may be used for the purpose of evaluation by the FRSA's ments included as part of the application process will not be osed is correct to the best of my knowledge. False information
Signature:	Date:

<u>NOTE TO APPLICANT</u>: You have the ultimate responsibility to ensure that the application, all forms, and transcripts are received by the FRSA Educational & Research Foundation and postmarked on or before March 31, 2021.