

Arkansas Water Well Contractors Association

Scholarship Program Application

To apply and be considered, you must be an immediate family member of the A.W.W.C.A. member or their employees. Applicants must be high school seniors intending to start a 2 or 4 year college program, or be currently enrolled in a 2 or 4 year college program.

Completed applications must be accompanied by an official copy of the student's high school or college transcript, class rank and SAT/ACT scores.

Application deadline is January 31st each year. Award recipients will be awarded during the summer general membership meeting. (Usually in August) A total of \$500.00 will be awarded to each recipient.

Student Name: _____ A.W.W.C.A. Member's Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Date of Birth: _____

Planned Graduation Date (high school): _____ or Planned Graduation Date (college): _____

College Major (if declared): _____

A.W.W.C.A. Company Name: _____

Address: _____ City: _____ State: _____ Zip: _____

High School / College Address: _____

City: _____ State: _____ Zip: _____

* List all High School honors and awards (attach additional sheets if needed):

* List all extracurricular activities (attach additional sheets if needed):

* Describe, in 150 words or less, an event in your life that has made you the person you are today and how it has affected your goals (attach additional sheets as needed)

Signature of Applicant: _____ Date: _____

Signature of Parent: _____ Date: _____