



**2020 Aviation, Aerospace & Engineering
Continuing Education Scholarship Application**

ALL APPLICATIONS MUST BE RECEIVED BY May 1, 2020
Responses must be submitted in a TYPED format, not handwritten

Applicant Information			
Full Name:			
Street Address:			
City:		County:	
State:		Zip Code:	
Phone Number:		Cell Phone:	
Date of Birth:			
Email Address:			
Are you a veteran?	Branch:	Dates of Service:	
Are you the child of a living or deceased member of the U.S. military; either on active duty, a veteran, or retired?			
Education			
What college are you currently attending?			
Other College(s) Attended:		Dates Attended:	
Estimated Graduation Date:		Major:	Minor:
How many credit hours have you completed?			
Current Classification:			
Current College Grade Point Average:			
Please complete the following questions:			
I. What career do you plan to pursue and why? (attach additional pages, if desired):			

II. Do you plan to stay in the Waco area after graduation? Explain.

III. Please describe your need for financial support and the effect this scholarship would have on your college education (attach additional pages, if desired):

IV. What other scholarships have you applied for and/or received?

V. Have you completed the Free Application for Federal Student Aid (FASFA)?
____yes ____no (Mark one)

If no, will you apply for financial aid in order to attend college? ____yes ____no (mark one)

Activities, Leadership & Honors

VI. Please describe a challenge you have experienced and explain how you resolved it.

VII. Are you currently working? (if yes, where?)

VIII. If yes, how many hours per week?

IX. Please describe your work experience (attach additional pages or résumé, if desired):

X. Please describe your involvement and any accomplishments in community and support activities outside of school (attach additional pages, if desired):

XI. Please list any other awards & honors you have received (school, community, industry):

XII. Please share any additional information you would like the scholarship committee to know about you for consideration of this award:

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge. I understand that false or misleading information in my application may result in my disqualification.

X

Applicant Signature:

Date

Applications will be considered regardless of race, color, creed or gender.

Please return completed application with all attachments to:

Kris Collins

Greater Waco Chamber of Commerce

P.O. Box 1220

Waco, Texas 76703

Please refer questions to Kris Collins at 254.757.5635 or kcollins@waco-chamber.com