#### **APPLICATION**

(To be completed by Student Applicant)

Please complete ALL sections of this application (use N/A if question does not apply). Type or print using blue or black ink.

Send <u>completed</u> application package (see Applicant Checklist for listing of complete package information) to local sponsoring HBA.

Personal Information:			
Name:Last	First		Middle
Home Address:			
College Address:			
Address for notification (check one):			
	☐ Coll	ege Address	☐ Home Address
Telephone: Home: ()		Cell Phone: (	
Primary email:	Altern	nate email:	
Date of Birth:			
If you are not a US Citizen, do you have the	e legal right to remain per	manently in the	e United States?
★ ★ If 'no' to the previous ques	tion, please answer the fo	ollowing:	
What is your visa status?			
What is your permanent resid	lent-alien number?		
Parent or guardian's name:			
Have you previously applied for the Willia	m Morehouse Scholarshi	p?	es 🗌 No
★ ★ If you have previously been	n awarded the William M	orehouse Schol	arship, please use the Return Applicant v award, tell us what year you applied bel
Award year(s) applied for:			
How did you find out or received informat	ion regarding the Willian	n Morehouse Sc	holarship?

## 2023

## **Scholastic Information** (To be completed by Student Applicant)

2 +/or 4 yr. College/University	Dates of Attendance	Major	Graduation Date	Degree
High School	Dates of Attendance	Major	Graduation Date	Diploma
CTE School	Dates of Attendance	Field of Study	Graduation Date	Diploma
Provide a chronological history of History should begin immediately				
If you are not currently enrolled in colleges to which you have applied College (name, city, state)	d or to which you intend to a			
What is your program of study?				
Does your college have a construc	tion degree curriculum?			
Are you enrolled in a Cooperative If yes, include a copy of your work (Scholarship winners who take part in	c/class schedule.	Yes No	olarship assistance while w	vorking on a co-op
a) <u>High School Student</u> - provide available grades from present		pt from previously	attended school(s) in a	ddition to any
<b>b)</b> <u>College Student</u> - provide cum college grades recorded to da				anscript of any
List all awards and/or honor rece	ived, if any:			
In what extracurricular activities Indicate elected offices held, if any.	have you participated while a	attending high scho	ol? College?	
Student / Community activiti	es:			
Athletics:				
·				

2023				William Moren 1st Time Applicant	iouse Scholarsh
Employment History (To be con	pleted by Student	Applicant)			
List all employment and construction in <b>Dates Company</b>	elated experiences <b>Du</b> t		internshi	ps, etc.) <i>Use an additiond</i> <b>Supervisor</b>	al sheet if necessary: <b>Phone</b> #
Have you had ANY experience in Const	ruction? Why or wh	y not?			
Financial Information					
Current source of income/Annual amo	unt:				
What is your financial need?					
Why do you feel you deserve this schol	arship?				
Are you receiving financial aid from an	y other sources?	☐ Yes	□ No	If yes: from what sou	rces and how much

## 2023

## Additional Information (To be completed by Student Applicant)

	ing only the space provided: extracurricular activity, along with your important contribution to it, and what has your individual?
	ion, or a construction related field, as a career? What event or series of events has led to ur previous work experiences will relate to a construction industry career.
-	career goals?
	ediate family presently employed in the construction industry? $\square$ Yes $\square$ No
Name:	Relationship:
Employer:	
Name:	Relationship:
Employer:	
Position with Company:	
representatives designated by the purposes of evaluation and selec maintain this application and sup	of the New York State Builders Association Research & Education Foundation and/oe NYSBA REF Board of Directors may: use the application and all attachments for th tion; obtain any income information necessary for processing this application; an porting information on file. I further agree that the information provided is true an will abide by the agreement of the scholarship.
Signature:	Date:

## **EVALUATION SHEET**

(To be completed by applicant's high school/college advisor)

structions to Evaluator: ase complete this form and <u>retu</u> st submit your evaluation as pa		1.										
mitted to the local HBA no later												
ke a judgment in a particular cat												
me of Evaluator:						Γitle: _						
me of School:												
dress:												
w long have you known the appl	icant? _											
nish information on the nature	and frequ	uency o	f your o	contacts	s and ob	servat	ions of	the ap	plicant			
					nd Pers							
ng a scale of 0 to 10, with "10" being	"Superior"	and "0"	being "I	Poor", ple	ease rate	the app	olicant c					
have known during your profession	"Superior"	and "0"	being "I	Poor", ple	ease rate	the app	olicant c					
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have known during your profession	"Superior" al career.	and "0"	being "I ould like BEL	Poor", ple	ease rate	the app nal com	olicant conments a	bout the	e applic			
have known during your profession	"Superior" al career.	and "0" If you w	being "I ould like BEL	Poor", ple to make	ease rate e additio	the app nal com	olicant conments a	bout the	e applic	ant, plea.		
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have known during your professions his form.  Cooperation Courtesy Dependability Industriousness Initiative Leadership Maturity Self-Control	"Superior" al career. PC	and "0" If you w	being "I ould like BEL AVE	Poor", ple to make LOW RAGE	ease rate e additio AVER	the appoint the same and comments that the same and the same are same and the same are same a	ABC AVEF	DVE RAGE 8	SUPI	ant, plea.	N/A	

# **EVALUATION SHEET - Personal Reference**

(To be completed by non-related adult acquainted to student applicant)

Name of Student Applicant:												
Instructions to Applicant: Allow the evaluator at least two we across the seal, for you to include w						ı should	d be ret	urned	to <u>you</u>	in a seal	led enve	lope, signed
Instructions to Evaluator: Please complete this form and returnment submit your evaluation as parsubmitted to the local HBA no later make a judgment in a particular cat	t of his/ than an	her cor d be re	nplete ceived	d applic in the N	ation m IYSBA o	aterial: office. <i>If</i>	s. The c you do	omple not kn	ted app ow the	olication applica	packag nt well o	e must be or unable to
Name of Evaluator:						Title: _						
Name of Employer:												
Address:												
How long have you known the appl	icant?											
Furnish information on the nature a	and freq	uency	of your	contact	ts and o	bserva	tions of	the ap	plican	t		
Using a scale of 0 to 10, with "10" being ' you have known during your professiond of this form.	'Superior al career.	" and "0	" being ' ould lik BEI		lease rai ce additi	te the ap	plicant c	over the	ne appli			
	1	2	3	4	5	6	7	8	9	10	N/A	
Cooperation												
Courtesy												
Dependability												
Industriousness												
Initiative												
Leadership												
Maturity												
Self-Control												
Personal Appearance												
Using the above evaluation, indicate	e your o <sub>l</sub>	pinion	of the a	applican	ıt's abil					Score _ eve it.		
Signature:				Da	ate:							

## **EVALUATION SHEET - Personal Reference**

(To be completed by non-related acquainted to student applicant)

Name of Student Applicant:												
Instructions to Applicant Allow the evaluator at least two we across the seal, for you to include wi						should	d be ret	urned t	to <u>you</u> i	in a seal	ed envel	ope, signe
Instructions to Evaluator Please complete this form and return must submit your evaluation as par submitted to the local HBA no later make a judgment in a particular cate	t of his than an	/her co d be re	mplete ceived	ed appli in the N	cation : IYSBA (	materia office. <i>I</i>	als. The <i>f you do</i>	compl not kr	eted a <sub>l</sub>	pplication of the property of	on packa ant well d	ige must b or unable t
Name of Evaluator:						Title: _						
Name of Employer:												
Address:												
How long have you known the appli-	cant?											
Using a scale of 0 to 10, with "10" being "S you have known during your professiona of this form.	Superior I career.	" and "0	" being " ould lik BEI		ease rat e additio	e the ap	plicant c	ove the	e applic			
	1	2	3	4	5	6	7	8	9	10	N/A	
Cooperation												
Courtesy												
Dependability												
Industriousness												
Initiative												
Leadership												
Maturity												
Self-Control												
Personal Appearance												
Using the above evaluation, indicate	your o	pinion	of the a	pplican	t's abili	ity to se	-			Score _ ve it.		