

AMERICAN WELDING SOCIETY

NORTH TEXAS SECTION

SCHOLARSHIP APPLICATION

NAME: _____ DATE: _____

ADDRESS _____ PHONE NUMBER _____

HIGH SCHOOL _____ ADDRESS _____

BIRTHDAY _____ PARENT OR GUARDIAN _____

PARENT OR GUARDIAN AWS MEMBERSHIP YES _____ NO _____

PLEASE ATTACH A RECENT HIGH SCHOOL AND OR COLLEGE TRANSCRIPT. ALSO ATTACH A WRITTEN PARAGRAPH FROM THE AWS SPONSOR OR HIGH SCHOOL COUNCIL AS A CHARACTER REFERENCE.

EMPLOYER ADDRESS

JOB DUTIES

SCHOLASTIC INFORMATION

HIGH SCHOOL _____ ADDRESS _____

COLLEGE _____ ADDRESS _____

GRADE POINT AVERAGE _____ TELEPHONE# _____

COUNSELOR OR EDUCATOR _____

SIGNATURE _____ DATE _____

PLEASE ATTACH A WRITTEN PARAGRAPH AS TO WHY YOU ARE INTERESTED IN RECEIVING THIS AWS SCHOLARSHIP.

HIGH SCHOOL HONORS _____

HIGH SCHOOL ACTIVITIES _____

HOBBIES, SPORTS, AND OR OTHER ACTIVITIES _____

SUBMISSION DATE: 3-27-09
