



Please read each of the following sections carefully.

Fill out to the best of your ability and return to be considered.

Introduction

This scholarship fund was established in 2008 by Sjon Delmore and the AWS Olympic Section 183 of District 19.

Purpose

The purpose for this scholarship is to provide financial assistance to those individuals attending an accredited technical or engineering college or university with an emphasis on welding technology applications and studies.

Eligibility

The scholarship will be awarded to a student pursuing a certificate/degree in welding technology with an emphasis in GMAW, GTAW, SAW, or SMAW applications and studies.

No financial need is required to qualify, but all applicants must meet the following eligibility requirements:

1. Must be a minimum age of eighteen (18) years.
2. Must possess a GED or high school diploma, or be enrolled as a college junior on one of the above study subject matters, etc.
3. Have maintained a *passing grade* in welding technology courses.
4. Be a citizen of the USA.
5. Must show an emphasis on welding applications in their course work.

All required application information must be provided to be considered.

Each applicant is encouraged to reapply; however, award recipients may be granted the award for a maximum of two years.

The award will be presented within the State of Washington to selected schools within the region.

The AWS Olympic Section 183 does not discriminate by age, race, color, national origin, disability, creed, sexual orientation or gender.



Selection

The recipient will be chosen by the Section Scholarship Committee. The Section Scholarship Committee will determine an award recipient by June 1st of each year.

Awards

The AWS Olympic Section will select and prepare multiple monetary awards throughout the year. Amount(s) awarded will vary.

Application Information

The applicant must submit each of the following:

1. Application form (see *attached*)
2. Two letters of reference
3. A Personal Statement
4. Transcript including course information on AWS emphasis criteria
5. Verification of Enrollment

PLEASE NOTE: Recipients agree to the release of their name and photo for publicity purposes on behalf of the AWS.

Deadline

Applications must be received by **March 1st** for the following fall term.

Application Instructions

The information requested on the application form is self-explanatory. Please fill out the form completely.

Financial Aid Statement

An official letter generated by the financial aid office indicating your current student budget, needs analysis, and financial aid awards, including scholarships. Please contact the Financial Aid Office to obtain this information.

Transcripts

Official scholastic records or grade transcripts showing high school, trade school, college or university attendance.

Personal Statement

Career objectives, general background information, organizational skills, participation in AWS Student and Section activities, and other factors that will help the selection committee understand your commitment to pursuing welding education. Indicate proposed welding curriculum and chosen school.



Application Checklist

- | | |
|---|--|
| <input type="checkbox"/> Complete application, signed by self
(and parent, if a minor) | <input type="checkbox"/> Personal statement of career goals |
| <input type="checkbox"/> Two letters of reference | <input type="checkbox"/> Financial aid statement |
| <input type="checkbox"/> Verification of Enrollment | <input type="checkbox"/> Transcripts from all applicable schools |

Please do not send photo of the applicant.

For more information

Regarding local Olympic Section:

Sjon Delmore, CWI/CWE
AWS Section 183
3501 "C" Street NE
Auburn, WA 98002

Cell: (253) 350-4241
Fax: (253) 939-1746
Email: sjon@ckworldwide.com
Local Section Website: <http://www.awssection.org/olympic/>

Regarding National Scholarships or Foundation services:

AWS Foundation, Inc
550 NW LeJeune Road
Miami, FL 33126

Phone: (305) 443-9353
Toll Free: (800) 443-9353
Fax: (305) 443-7559
National Website: <http://www.aws.org/>

Manager:
Vicki Pinsky, ext. 212
Email: vpinsky@aws.org

Assistant:
Nazdhia Prado-Pulido, ext. 250
Email: nprado-pulido@aws.org





Scholarship Application

Please return to:
Sjon Delmore
AWS Section 183
3501 "C" Street NE
Auburn, WA 98002

DEADLINE: March 1st

Applicant Information

First Name: _____ Last Name: _____
Date of birth: _____ Social Security#: _____
Phone: _____ Cell Phone: _____

Current address

Address: _____
City: _____ State: _____ ZIP Code: _____
Are you a US Citizen? Yes ___ No ___ If not, Country _____
Are you at least 18 years of age? Yes ___ No ___ (if no, please fill in the following section)

Parent/Guardian's Information *(if applicable)*

First Name: _____ Last Name: _____
Address: _____
City: _____ State: _____ ZIP Code: _____
Phone: _____ Cell Phone: _____

Employment Information *(if applicable)*

Current employer: _____
Position: _____
Manager: _____ Phone: _____
Address: _____
City: _____ State: _____ ZIP Code: _____

Name of College/University

Name: _____ Phone: _____
Person of Contact: _____
Address: _____
City: _____ State: _____ ZIP Code: _____
Proposed Major Area of Study: _____



Expected Date of Graduation: _____

Previously attended Schools (From High School to Present School)

Name: _____ Date(s) Attended _____
Address: _____
Name: _____ Date(s) Attended _____
Address: _____
Name: _____ Date(s) Attended _____
Address: _____

Demonstrated Welding Experience

(Include any School, Community Activities, Honors and/or welding work experience)

Activity: _____ Year: _____
Offices & Honors: _____ Year: _____
Activity: _____ Year: _____
Offices & Honors: _____ Year: _____
Activity: _____ Year: _____
Offices & Honors: _____

Previous Work Experience

(List most recent employer if applicable and use additional paper if necessary)

Name: _____
Job Description (be specific): _____
Name: _____
Job Description (be specific): _____
Name: _____
Job Description (be specific): _____

Financial Aid Report

(List previous and current educational scholarships, grants, loans, work-study, or student employment)
Attach a copy of your Student Financial Aid Form, even if no financial aid was received.

Institution and Location: _____ Date: _____
Type of Aid: _____ Amount: _____



Institution and Location: _____

Date: _____

Amount: _____

Type of Aid: _____

Personal References

Name: _____

Occupation: _____

Address: _____

City: _____

State: _____

ZIP Code: _____

Name: _____

Occupation: _____

Address: _____

City: _____

State: _____

ZIP Code: _____

_____ I agree to the following statement:

I represent that the information provided in this application is true, complete and accurate to the best of my knowledge. I understand that any misrepresentation or omission of information is grounds for being ineligible to receive any award.

_____ I agree to the following statement:

I understand that the information provided might be used by the **AWS Olympic Section** to determine whether to accept this application. I authorize the AWS Olympic Section to verify all the information given in this application.

Applicant

Print

Name: _____

Signature: _____

Date: _____

Signature of Parent or Guardian (IF UNDER 18 YEARS OF AGE)

Print

Name: _____

Signature: _____

Date: _____



VERIFICATION OF ENROLLMENT

Dear Admissions/Registrar:

This student is applying for a scholarship from the American Welding Society through the Olympic Section. Please complete the information requested below for verification of the student's acceptance to this academic institution.

In addition, please verify the student's current enrollment status and total number of hours completed. This information should be included in the student's application package.

Thank you,

AWS Olympic Section

To be completed by the Student:

I authorize the above requested information to be released to the AWS Olympic Section in connection with my application for a scholarship.

Student

Academic Institution

Student Social Security Number

Date

To be completed by Admissions / Registrar:

Student

Academic Institution

Date of Acceptance to the Institution: _____

Is this student currently enrolled? _____

Yes _____ No _____

Is this student Full or Part Time? _____

Full _____ Part _____

Student Enrollment Status: _____

Junior _____ Senior _____ Other _____

Course of study currently enrolled: _____

Number of Academic Hours Completed: _____

Print Name

Title

Signature

Direct Telephone



**STATEMENT OF UNMET FINANCIAL NEED
ATTN: OFFICE OF FINANCIAL AID**

Dear Admissions/Registrar:

This student is applying for a scholarship from the American Welding Society through the Olympic Section. Please complete the information requested below for verification of the student's acceptance to this academic institution.

In addition, please verify the student's current enrollment status and total number of hours completed. This information should be included in the student's application package.

Thank you,

AWS Olympic Section

To be completed by the Student:

I authorize the above requested information to be released to the AWS Olympic Section in connection with my application for a scholarship.

Student

Academic Institution

Student Social Security Number

Date



STATEMENT OF UNMET FINANCIAL NEED, CONTINUED

To be completed by Office of Financial Aid:

Student **Academic Institution**

Academic Year: _____

Expected amount of financial need:

Tuition and Fees	\$	
Room and Board	\$	
Estimated Academic & Personal Expenses (Books, Tools, Supplies, Travel)	\$	
Total:		

Financial Aid (Student must have filed for FAFSA, *if required*)

Personal/Family Contribution Expected	\$	
Scholarships	\$	
Grants	\$	
Loans	\$	
Work Study	\$	
Other	\$	
Total:		

Total amount of Expected Unmet Financial Need: \$ _____

Comments:

Signature

Title

Direct Telephone

Date

