District 3 Shirley Bollinger Scholarship Application Package

For a bachelors degree in welding engineering or welding engineering technology

Provided through the AWS Foundation, Inc.
550 N. W. LeJeune Road
Miami, Florida 33126
District 3 Shirley Bollinger Scholarship

Introduction

Shirley Bollinger received a Bachelors Degree from York College in 1986 with a dual major in Marketing & Business Administration. It took Shirley 8 years of night school to fulfill her dream of a college degree. While pursuing her education at night, she also maintained a full-time job, and was the mother of 2 very active children. Shirley was employed full time from 1977 to 2000 with ESAB Welding & Cutting Products in Hanover, PA. Shirley started as a customer representative for ESAB and ultimately reached the goal of Marketing & Product Control Manager. She was a very active member of the York-Central Section in York, PA where she served in many different capacities, eventually as Chairman from 1988-1989. Shirley served on the AWS Board as a District 3 Director from 1990 to 1997. Eventually Shirley reached her goal as the first woman President of the American Welding Society from 1998 to 1999. Shirley was an advocate for Education in all senses of the word, which included getting to know students in District 3 and to meet students all over the world during her travels as AWS President. With this scholarship, District 3 hopes to encourage and help students to further their education in welding and to keep Shirley’s legacy of secondary education alive.

Purpose
This scholarship is to pursue a minimum four-year bachelors degree in welding engineering or welding engineering technology.

Eligibility
All applicants must meet the following eligibility criteria:

1. Applicant must be a minimum of eighteen years of age.
2. Applicant must have a minimum high school diploma.
3. Applicant must have a 3.2 overall grade point average.
4. Applicant must provide a letter of reference indicating how they will use their welding education.
5. Student must be enrolled full time.
6. Proof of financial need is required to qualify.
7. Applicants has a documented work history that includes hands-on welding experience verified by an employer.
8. Applicant must submit all required application information.

9. Applicant must be a citizen of the United States.

10. Applicant must reside in District 3.

11. Applicants may reapply; however, persons who have received this award may reapply and may be granted the award for a maximum of 4 years.

The award will be presented to individuals who reside in District 3. Applicant does not have to be a member of the American Welding Society.

The AWS Foundation does not discriminate by age, race, color, national origin, disability, creed, or gender.

**Selection**

The Selection Committee (at least five (5) members each from a different Section within the District, selected by the District Director plus one family member) will determine award recipient at their annual district conference held in the late spring or early summer of each year.

**Awards**

The annual award is $750. No awards will be paid to the recipient. All awards are for tuition and fees only, and will be paid directly to the academic institution by the AWS Foundation.

**Application Information**

**Procedure**

Applicant must submit the following:

1. Application (form)
2. Two letters of reference only - i.e., one documenting previous hands-on welding experience and the other documenting your ambitions, goals, leadership, and any other factors to assist the committee in judging your eligibility.
3. Personal Statement
   - Demonstrated timeliness and completion of assignments
   - Creativity in solving problems
   - Demonstrated responsibility on own initiative
   - Ability to work well with others
   - Organizational skills (ability to handle multiple tasks, time management)
   - Participation in class, campus and outside organizations
   - Participation in AWS Student and Section activities
   - General Background information
   - Career Objectives
4. Original Official Transcript(s) sent directly from the college or university; high school students entering their first year of a welding program must provide an original official high school transcript.
5. Statement of Unmet Financial Need completed by an accredited academic institution even if no FAFSA was filed
6. Verification of Enrollment completed by college or university
7. Essay – i.e., “Why I Want to Pursue a Career in Welding.”
   All essays should be 300-500 words in length, typewritten, and double-spaced.

Please note: Recipients may be asked to submit a digital photograph for publicity purposes.

**Deadline**
Deadline for application is March 1st of each year.

**For More Information**
Please contact:
AWS Foundation, Inc.
550 N. W. LeJeune Road
Miami, FL 33126
800-443-9353 x250

Revised 10/08
District 3 Shirley Bollinger Scholarship Application

Deadline for Submission: March 31st each year
(Print in dark ink or type)

Social Security Number __________________________ Are you an AWS member? Yes _____ No _____ Date ________________

Applicant's Name ______________________________ Email address ________________________________

Current Address ________________________________ Number ________________________________ Street ________________________________ Apt. No. ________________________________

City ________________________________ State ________________________________ Zip ________________________________ Home Phone Number ( _______ ) ________________________________

Are you a U. S. Citizen? Yes _____ No _____ If no, Country ________________________________ Are you at least 18 years of age? _____

Parent/Guardian's Name ________________________________
(If under 18 years of age)

Parent/Guardian's Address ________________________________ Number ________________________________ Street ________________________________ Apt. No. ________________________________

City ________________________________ State ________________________________ Zip ________________________________

Parent/Guardian’s Home Phone Number ( _______ ) ________________________________ Work Phone Number ( _______ ) ________________________________

Are you employed? Yes _____ No _____ If yes, please give the following:

EMPLOYER'S NAME ________________________________

Employer's Address ________________________________ Number ________________________________ Street ________________________________ Apt. No. ________________________________

City ________________________________ State ________________________________ Zip ________________________________ Employer’s Phone Number ( _______ ) ________________________________

NAME OF COLLEGE OR UNIVERSITY ________________________________

Address ________________________________ Number ________________________________ Street ________________________________

City ________________________________ State ________________________________ Zip ________________________________

Contact at College/University ________________________________ Phone Number ( _______ ) ________________________________

Proposed Major Area of Study ________________________________ Expected Date of Graduation ________________

I affirm the information that I have (will) provided on this application, or any supportive materials, is (will be) complete, accurate, and true to the best of my knowledge. I understand that furnishing false information may result in not being considered or revocation of financial aid at some later date.

Signature of Applicant ________________________________ Date ________________

Signature of Parent or Guardian ________________________________ If under 18 years of age Date ________________
**LIST OF SCHOOLS YOU PREVIOUSLY ATTENDED** (From High School through the Present)

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<th>Name of School</th>
<th>Address</th>
<th>Date Attended</th>
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***Attach a transcript from all previous institutions attended***

**DEMONSTRATED WELDING EXCELLENCE** (Include School/Community Activities/Honors & welding work experience)

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<th>Activity</th>
<th>Year</th>
<th>Offices &amp; Honors</th>
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**WORK EXPERIENCE** (Include present and previous employment, and use additional paper if required)

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<th>Year</th>
<th>Company Name</th>
<th>Job Description (be specific)</th>
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**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.

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<th>Date</th>
<th>Institution and Location</th>
<th>Type of Aid</th>
<th>Amount</th>
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**LIST OF PERSONAL REFERENCES:**

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<tr>
<th>Name</th>
<th>Street/City/State/Zip</th>
<th>Occupation</th>
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**PERSONAL STATEMENT** — Attach a supplementary sheet to give information about your ambitions, goals, background, leadership, and any other factors that would assist the committee in judging your eligibility.
ESSAY – In 300-500 words, please provide your thoughts on the following topic. Essays are recommended to be typewritten.

“Why I Want to Pursue a Career in Welding”
Verification of Enrollment

Dear Admissions/Registrar:

This student is applying for a scholarship from the American Welding Society through the AWS Foundation. 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 scholarship application package. Thank you.

AWS Foundation, Inc.

To be completed by Student:

I authorize the above requested information to be released to the AWS Foundation, Inc. in connection with my application for an AWS Scholarship.

Student ______________________________ Academic Institution ______________________________

Social Security Number ______________________________ Date ______________________________

To be completed by Admissions/Registrar:

Student ______________________________ Academic Institution ______________________________

Date of Acceptance to this Institution: ______________________________

Is this student currently enrolled? ______________ Is the student part time or full time? ______________

Course of study currently enrolled: ______________________________

Number of Academic Hours Completed: ______________________________

Student State: (circle one) Freshman Sophomore Junior Senior Other

Signature ______________________________ Title ______________________________

Print Name ______________________________ Telephone (____) ______________________________
Statement of Unmet Financial Need

ATTENTION OFFICE OF FINANCIAL AID

This student is applying for a scholarship from the American Welding Society through the AWS Foundation. Please complete the information requested below for verification of the student’s statement of unmet financial need, or attach an official letter from the Office of Financial Aid indicating the student’s current budget, needs analysis, and financial aid awards, including scholarships.

Thank You,
AWS Foundation, Inc.

To be completed by Student:

I authorize the above requested financial aid information to be released to the AWS Foundation in connection with my application for an AWS Scholarship.

________________________________________  ______________________________
Student Signature                            Academic Institution

________________________________________  ______________________________
Social Security Number                        Date

(over)
To be completed by Office of Financial Aid:

<table>
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<tr>
<th>Student Name</th>
<th>Academic Institution</th>
<th>Academic Year</th>
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</table>

Expected amount of financial need:

- Tuition & Fees $ __________________
- Room & Board $ __________________
- Estimated Academic & Personal Expenses (Books, Tools, Supplies, Travel) $ __________________
- **TOTAL** $ __________________

Financial Aid:

- Did student file for FAFSA? Yes ____ No ____
- Personal/family contribution expected $ __________________
- Scholarships $ __________________
- Grants $ __________________
- Loans $ __________________
- Work Study $ __________________
- Other $ __________________
- **TOTAL** $ __________________

**Total Amount of Expected Unmet Financial Need** $ __________________

Comments __________________________________________

__________________________________________

__________________________________________

**Signature** ____________________________________  **Title** ____________________________________

In case of questions, please contact: __________________________________________

Telephone (_______) ____________________________  Date ____________________________