



Southern San Joaquin  
Branch

## AMERICAN SOCIETY OF CIVIL ENGINEERS

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### SCHOLARSHIP APPLICATION 2016

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### APPLICATION INSTRUCTIONS

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- 1 The ASCE Scholarships have been established to assist promising students in the Civil Engineering Field to further their education and attain their career goals.
- 2 To be considered, the student must be a graduate (or graduating Senior) of a Kern County High School, accepted into an accredited College or University pursuing Civil or Environmental Engineering/Science and must demonstrate the following:
- 3 The student must have at least a 2.50 grade point from his/her high school and/or college. The application must include sealed and certified transcripts from high school and/or college, which **must** include the Fall semester / quarter of 2015.
- 4 Applicants must include recommendations from three (3) references using the enclosed "Confidential Scholarship Reference" form. References shall not be related to the applicant.
- 5 Applications should be typed or legibly printed by the applicant on the enclosed form and attach School and Community Activities and Statement of Need and Educational Purpose and include the student's contact information and permanent address.
- 6 Recipients of the ASCE Scholarship will be chosen by the Southern San Joaquin Branch of ASCE based on an independent panel review of the student's application and recommendations.
- 7 If chosen, your scholarship will be for a one-year period in the amount of up to \$800.
- 8 All instructions must be followed completely or the application will be deemed incomplete and the applicant disqualified.
- 9 **The application deadline is April 15, 2016. Applications must be postmarked or received by this date in order to qualify, and sent to:**

**ASCE Scholarship Committee**  
c/o Sandy Bergam  
iWalk, Inc.  
7213 Wilford Ct  
Bakersfield, CA 93309



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**AMERICAN SOCIETY OF CIVIL ENGINEERS**

**SCHOLARSHIP APPLICATION**

2016

**BIOGRAPHICAL INFORMATION**

Name: Last First Middle Month/Day/Year

( )

Current Mailing Address: City State Zip Code Phone Number

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Permanent Mailing Address: City State Zip Code Phone Number

Marital Status: Single \_\_\_\_\_ Married \_\_\_\_\_

Birth Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Age \_\_\_\_ Male \_\_\_\_ Female \_\_\_\_

**EDUCATION:**

List all high schools and colleges attended (including your present school) with dates of attendance and graduation/anticipated graduation date: Please start with your current enrollment.

NAME & LOCATION SCHOOL	ATTENDANCE DATES	GRADUATION DATE	MAJOR	GPA
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

COLLEGE LEVEL LAST FALL: (Circle One) FR SOPH JR SR GRADUATE

College or University you will attend next Fall: \_\_\_\_\_

Have you received, or are you applying for other scholarships? Yes \_\_\_\_ No \_\_\_\_ If "Yes", list name and dollar amount.

Name: \_\_\_\_\_ Amount \_\_\_\_\_

Name: \_\_\_\_\_ Amount \_\_\_\_\_

If you have a disability, do you wish to be considered for scholarships for students with a disability Yes \_\_\_\_ No \_\_\_\_

Are either of your parents a member of American Society of Civil Engineers? Yes \_\_\_\_ No \_\_\_\_

If "Yes", list name of parent (s) \_\_\_\_\_



Indicate below your college or high school activities, including club membership, offices held, awards, honors, sports, and/or recognitions you have received.

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Indicate below your community activities including civic organizations, church, clubs, volunteer work, etc.

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Are you currently employed? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, name of employer: \_\_\_\_\_

I am asking the following instructors to submit recommendations in support of my application for scholarship:

- 1 \_\_\_\_\_
- 2 \_\_\_\_\_
- 3 \_\_\_\_\_

**AS A SCHOLARSHIP APPLICANT, I hereby certify that I have completed all of the information called for on this application and that it is true and correct. Furthermore, I hereby release information contained on this application as well as my academic transcripts to campus personnel and/or private donors as may be required in connection with securing a scholarship for me. In addition, I waive my right to access and review confidential recommendations acquired for purposes of determining and granting this scholarship. I understand that scholarships may be denied if any information reported on this application is found to be intentionally misleading or inaccurate.**

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**(Attach School and Community Activities and Statement of Need and Educational Purpose.)  
(Attach Official Academic Transcripts and 3 Confidential Recommendations)**