WASHINGTON STATE GROUND WATER ASSOCIATION
SCHOLARSHIP FUND INFORMATION

The Washington State Ground Water Association (WSGWA) is pleased to offer one or more scholarships. The Association recognizes the need for educational advancement and seeks to provide support for its members and their families. Scholarships are typically awarded at values of up to $1,000.

QUALIFICATIONS:
Applicants must be a member of the Washington State Ground Water Association (WSGWA), family member of WSGWA, employee member of WSGWA member, or direct family member of employee member. Applications must be completed in full and received at the WSGWA office by April 15th. Scholarships will be awarded June 1st by the Scholarship Committee. Funds will be paid directly to the academic institution.

DEFINITION OF FAMILY FOR QUALIFICATION OF APPLICANTS:
(Adopted from the Family and Medical Leave Act (FMLA) administered by the U. S. Department of Labor definition)

- Spouse – a husband or wife as defined according to applicable state or local law
- Registered domestic partners.
- Parents – includes biological parents and individuals who act as parents, but does not include parents-in-law.
- Grandparents – biological grandparents.
- Son, daughter, or grandchild – includes biological, legally adopted, foster children, stepchildren, legal wards, and other persons for whom the member acts as parent.

RULES FOR APPLICATION:
✓ Scholarships are for an accredited college, university, or technical school.
✓ Applicants must have a minimum 2.5 GPA.
✓ Applicants must be a U. S. citizen or legal resident of the U. S.
✓ Awarded applicants will be requested to submit a picture and article for publication.

APPLICATION PROCEDURE:
To be considered applicants must submit the following documents:
☐ Completed Scholarship Application
☐ A 500 word or less description of your educational pursuit towards your career.
☐ A 300 word or less description of your financial background.
☐ Copy of high school transcripts or school transcript if currently attending a post-high school educational institution.

EVALUATION GUIDELINES:
Selection of the Scholarship award will be based on applicant’s goals, financial needs, academic achievements, school and community involvement and work experience (not necessarily in this order) and will be selected by the scholarship committee. If unable to submit any required documentation, please provide a brief explanation.
Date: ____________________

Name: _______________________________________________________________________
    (Last, first, middle initial)

Address: _____________________________________________________________________
    (Street or box number)

City: ____________________________  State _______________  ZIP ____________

Phone: _______________  Date of birth: ___________  Male or Female (circle)

High School: _______________________________________________________________

Date of Graduation: ______________________________________________________

School Address: ___________________________________________________________

Affiliation to WSGWA member named: ________________________________

Relationship to this person: ________________________________

Company Name: __________________________________________________________

Address: __________________________________________________________________

City: ____________________________  State _____  Zip ____________

Company Phone: ___________________________________________________________
WSGWA SCHOLARSHIP APPLICATION
EDUCATION INFORMATION

Are you a citizen of the United States? Yes _____ No _____ If no, type of visa ________________

Name of college/institution ___________________________________________________________________

Address of college/institution __________________________________________________________________

Is this a 4-year, 2-year, or technical/vocational school? ________________________________

Date of proposed entrance ________________ Planned dates of attendance ________________

Proposed field of study ___________________________________________________________________

Describe in 500 words or less the nature of your educational pursuit and the ambitions you have career wise. Please include activities, clubs, and/or sports you are involved in, additional courses, special recognition, awards, honors, scholarships, community involvement, and work experience. You may attach statement.

Describe in 300 words or less information about your background financial need. You may attach statement.

I affirm the information that I have provided on this application or any supportive financial aid materials is complete, accurate, and true to the best of my knowledge. I understand that furnishing false information may result in ineligibility for the award.

Applicant’s Signature __________________________ Date __________________________

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