SOUTHEASTERN INSULATION CONTRACTORS ASSOCIATION RICK HUGGINS SCHOLARSHIP FUND

For Members, Their Employees, Their Dependents



Applicant: Please complete all sections of this application and email the application to director@seica.org. Use N/A if question does not apply. Please type or print using ink. Appearance and completeness of application will be considered during evaluation.

I. <u>APPLICANT CONTACT INFORMATION</u>

Name:				
Name:	First	Middle	Middle	
Student Number #:	School:			
Address: Home:				
Number & Street	City	State	Zip	
College:				
Number & Street	City	State	Zip	
E-Mail: Home:	College:			
Telephone: Home:	College:			
Present age:	Date of birth:			
		Month	Day	Year
Marital status:	Spouse's name:			
Spouse's occupation:	Spouse's annual income: \$			
Number of dependents other than spouse:				
Parent or legal guardian's name: Relationship:				
Address, if different than item above:				
Name of employee of SEICA member firm:				
Name of SEICA member firm:				
Relationship of employee to applicant:				

II. SCHOLASTIC INFORMATION

Provide names, city, and state of high schools, vocational schools, career development programs, colleges, and/or universities you have attended or are currently attending. List most recent first. Be sure to indicate month and year of anticipated graduation.

Four-Year College	Attended (from-to)	Major	Anticipated Month & Year of Graduation
A			
В			

Two-Year College	Attended (from-to)	Major	Anticipated Month & Year of Graduation
A			
B			
High School	Attended (from-to)	Major	Month & Year of Graduation
A			
В			
Vocational School or Car	reer Development Programs Attended (from-to)	Major	Month & Year of Graduation
indicate: Current year in high scho Senior Freshman (Check one of the abov If you are not currently e or are planning to transfe order of preference):	ool – Sophmore Junior e)	career developn	program, college, or university, Month and Year of Enrollment Anticipated date of grad (Month, Year) nent program, college or university, which you intend to apply (in Anticipated Month & Year of Graduation
A			
В			
In what program do you	expect to major/get your degree	?	
Does your school have a	construction major/degree curri	iculum?	
Are you enrolled in a Co- work/class schedule.	operative Education Program?		If so, include a copy of your
Specify Grade Point Ave	rage:	P	Point scale: 3 4 5 6 (circle one)
activities. Indicate elected sheets as necessary.	ctivities have you participated w l offices held, if any. Specify p t government, Key Club, Nation	urpose of local	

Community activities (Boy Scouts, Girl Scouts etc.):

Athletics:			
Other:			

III. EMPLOYMENT HISTORY

List full-time employment, summer employment, or other part-time work, briefly explaining duties and responsibilities (beginning with your most recent job). If part-time work, indicate number of hours per week. Add additional sheets as necessary.

From:		To:			
Month	Year		Month	Year	
Firm's name and type o	f business:				
Address:					
Supervisor's name and	position in comp	any:			
Your duties:					
				Wages: \$	
From:		To:			
	Year		Month	Year	
Firm's name and type o	f business:				
Address:					
Supervisor's name and	position in comp	any:			
Your duties:					
				Wages: \$	

From:			To:			
	Month	Year		Month	Year	
Firm's	name and type of	f business:				
Addre	ss:					
Superv	visor's name and	position in compa	my:			
Your o	luties:					
					Wages: \$	
					U	

IV. PERSONAL STATEMENT

Provide a brief summary describing why you should be considered for this scholarship. Attach additional sheet(s) if necessary.

