

AWS Foundation
DISTRICT SCHOLARSHIP PROGRAM
INSTRUCTIONS AND APPLICATION



Foundation, Inc.

Building Welding's Future through Education

550 N. W. LeJeune Road
Miami, FL 33126
305-443-9353
found@aws.org

Mail to:
AWS Foundation
550 N. W. LeJeune Road
Miami, FL 33126

American Welding Society District Scholarship Application

Submission Deadline:
March 1st

Student ID Number _____ AWS Member (optional) Y/N If yes, # _____ Date _____

Applicant's Name _____

Current Address _____ Email _____

City _____ State _____ Postal Code _____

Home Phone (____) _____ Cell Phone (____) _____ Work Phone (____) _____

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

Parent/Guardian's Address _____

City _____ State _____ Postal Code _____

Are you employed? If so, please provide the following:

Employer's Name _____

Employer's Phone Number (____) _____ Supervisor's Name _____

Proposed School (Institute, College or University) _____

Address _____

City _____ State _____ Postal Code _____

Proposed Major Area of Study _____

Starting Date _____ Expected Date of Graduation _____

I affirm that the information I have provided on this application and the supporting material is 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.

Applicant Signature _____ Date _____

Parent/Guardian Signature _____ Date _____
(If under 18 years of age)

Hometown Newspaper _____ Contact Name _____

Mailing address _____ Contact Telephone _____

If you are selected as a District Scholarship recipient, the AWS Foundation may request your photograph and/or testimonial for promotion and public relations purposes. Please indicate below:

Yes, I will approve use of my information/photo No, I will not approve the use of my information/photo

Signed _____ Parent/Guardian Signature _____
(If under 18 years of age)

List Schools You Have Attended (High School to Present)

Name of School	Street/City/State/Zip	Date attended

Continue on separate sheet if needed.

◆◆◆ Attach a transcript from all previous schools attended. ◆◆◆

Activities Record (Include AWS, School, and Community Activities and Honors)

Indicate in the spaces provided the grade levels in which you participated in the listed activity.

Name of Activity	11 th	12 th	Post Secondary	Offices and Honors

Continue on separate sheet if needed.

Work Experience (Include present and previous employment)

Total number of hours worked per week		Total amount earned per week \$
Month/year	to Month/year	Company

Continue on separate sheet if needed.

Financial Aid Report

You must attach an official letter generated by the financial aid office at your school indicating your current student budget, needs analysis, and financial aid awards, including scholarships. Contact the financial aid office to obtain this aid information, as you will need to sign a release form.

List of Personal References

Name	Address	Telephone Number	Occupation

Career Influence: Which welding instructor influenced you the most to make welding your career choice?

Instructor's Name: _____ School or Educational Institute: _____

◆◆◆ Attach a personal statement that would assist in judging your eligibility ◆◆◆

How did you hear about this scholarship? _____

The American Welding Society or the AWS Foundation does not discriminate by age, race, color, national origin, creed or gender

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Working For You

The AWS Foundation is dedicated to advancing educational opportunities to students preparing for a career in the welding and related joining technologies.

Other Services:

National Scholarship Program: provides funding for students seeking an undergraduate degree in welding engineering, welding technology, or a welding related field as specified in each scholarship. Each of these scholarships has specific requirements related to qualification.

Research Fellowship Program: For graduate students wishing to pursue areas of research related to the welding and joining industry.

For further information on these programs, contact the AWS Foundation at 800 443-9353, extension 250.



Application Instructions:

The information requested on the application form is self-explanatory. Please fill out the form completely. Keep in mind that the recipients are selected between May and June. **Membership is optional, if you receive a District Scholarship and you are not a member, you will receive a one-year free membership. If you receive a District Scholarship and you are a member, your membership will be extended one year.**

In addition to the application form you must enclose the following:

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.

Transcript(s)

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, sign and parent sign, if minor | <input type="checkbox"/> Prepare personal statement of career goals |
| <input type="checkbox"/> Supply financial aid statement | <input type="checkbox"/> Mention influential welding instructor |
| <input type="checkbox"/> Include transcripts from all applicable schools | <input type="checkbox"/> Do not send photograph of applicant |

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