

VIRGINIA HIGHWAY WORKERS SCHOLARSHIP

GUIDELINES

The **Virginia Highway Workers Scholarship** is administered by the Virginia Transportation Construction Alliance (VTCA), the American Concrete Pavement Association Mid-Atlantic Chapter (APCA), with assistance from the Virginia Department of Transportation (VDOT). The scholarship is funded by the Annual Highway Workers Golf Tournament. This scholarship provides financial assistance to qualified and deserving students attending institutions of higher learning. Up to \$3,000 will be awarded this year.

Eligibility:

1. An applicant must be an employee, dependent child or spouse of an employee of a member firm, in good standing, of VTCA or ACPA Mid-Atlantic Chapter. Applicants must be citizens of the United States.
2. This program is for undergraduates only. Applicants must be completing their senior year of high school or be enrolled in or applying for enrollment in an accredited institution of higher learning. Applicants must have a minimum cumulative grade point average of 2.0 on a 4.0 scale.
3. A recipient of a scholarship in one year may apply the following year, and may receive preference based upon performance.

Application Process: Candidates must submit:

1. Personal letter outlining qualifications.
2. Application form.
3. High school and college transcripts (if applicable).
4. Reference form completed by a member of the applicant's academic community if currently enrolled. If not currently enrolled, please supply a reference letter.
5. Form certifying that you, your spouse or your parent is employed by a VTCA or ACPA member.

Entries must be received by VTCA by May 1, 2010 for the 2010-2011 scholarship.

Evaluation and Selection:

Applications will be screened by the Scholarship Committee. The criteria for selection include academic performance, employment experience, extracurricular and leadership activities. Applicants may be required to meet personally with members of the Committee. Selections will be announced in late May. In the event no qualified students apply, the Committee reserves the right to withhold the scholarships.

For Further Information:

For an application package or for more information at www.vtca.org and click About VTCA and then click on Scholarships or contact Stephanie Rusnak at VTCA, 804-330-3312, fax 804-330-3850, e-mail stephanie@vtca.org.

Virginia Highway Workers Scholarship

Application

This scholarship is administered by the Virginia Transportation Construction Alliance (VTCA), the American Concrete Pavement Association Mid-Atlantic Chapter (APCA), with assistance from the Virginia Department of Transportation (VDOT) and provides support to deserving individuals pursuing a degree at a two- or four-year institution of higher learning.

Administered by the
Virginia Transportation Construction Alliance
620 Moorefield Park Drive, Suite 120
Richmond, Virginia 23236-3692
Phone: 804-330-3312 Fax: 804-330-3850
e-mail: stephanie@vtca.org
web site: www.vtca.org

Deadline: May 1, 2010

Name: _____
Last First Middle

Home Address: _____
Number and Street City State Zip

College Address: _____
(If applicable) Number and Street City State Zip

Telephone: () _____ School Phone: () _____ Birth Date: _____
MM DD YY

E-mail Address: _____

Parents or Legal Guardians: _____
(If under age 18)

Address: _____

List the colleges or universities to which you have applied or are considering applying:

If you are presently in college, please provide the following:

School & City	Degree Program	GPA	Expected Graduation Date
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Current high school or high school graduated from:

Date of graduation:

What activities have you been involved in that you believe have made you a better citizen of your school and/or community?

Briefly describe your future career plans.

Employment Information: Please provide a brief summation of your employment history, beginning with your most recent or present job. If the position was a part-time one, indicate how many hours you worked each week. If necessary, use additional sheets.

From _____ to _____ Position held: _____
Month/Year Month/Year

Company name and type of business: _____

Address: _____

Supervisor's name and position: _____

Your duties: _____

From _____ to _____ Position held: _____
Month/Year Month/Year

Company name and type of business: _____

Address: _____

Supervisor's name and position: _____

Your duties: _____

From _____ to _____ Position held: _____
Month/Year Month/Year

Company name and type of business: _____

Address: _____

Supervisor's name and position: _____

Your duties: _____

From _____ to _____ Position held: _____
Month/Year Month/Year

Company name and type of business: _____

Address: _____

Supervisor's name and position: _____

Your duties: _____

Father's occupation: _____

Mother's occupation: _____

Brothers and sisters in family: _____ Number dependent on parents: _____

I hereby certify that the information here is true and accurate and that I am a citizen of the United States. I understand that the Virginia Highway Workers Scholarship, if awarded to me, will be paid to the accredited higher education institution of my choice. I give my permission for the information contained herein to be used in the evaluation of my application. I also understand that the references received by VTCA in support of my application will be held in confidence.

Signature of applicant: _____

Date: _____

Parent or guardian signature: _____

Date: _____

(If under age 18)

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EMPLOYEE CERTIFICATION FORM

This form is used to certify that the applicant, the applicant's spouse or a parent of the applicant is employed by a VTCA or ACPA member firm.

Applicant Name

Parent Name

The above-listed student has applied for the Virginia Highway Workers Scholarship. The applicant has indicated that he/she, or his/her spouse, or his/her parent or legal guardian is employed by your firm, which is a member of VTCA or ACPA. We ask that you confirm this. If you have any questions, please contact Stephanie Rusnak at 804-330-3312. Thank you.

Company: _____

Address: _____

Phone: _____

Employer signature: _____ Date: _____

Name & Title: _____

Please return this form by May 1, 2010 to:

Stephanie Rusnak
Virginia Highway Workers Scholarship
620 Moorefield Park Drive, Suite 120
Richmond, VA 23236-3692
Phone: 804-330-3312
Fax: 804-330-3850
E-mail: stephanie@vtca.org
Web: www.vtca.org

Please rate each characteristic listed, using a scale of 0 to 10, with 10 being Superior and 0 being Poor.

	Poor	Below Average			Average			Above Average			Superior
	0	1	2	3	4	5	6	7	8	9	10
Cooperation											
Courtesy											
Completeness of Assignments											
Extracurricular Activities											
Initiative											
Leadership											
Maturity											
Integrity											

Please provide a brief narrative description of your knowledge of the applicant's abilities, character and need/desire for a scholarship.

Signature

Title

Printed Name

Date

Thank you for your assistance.

I hereby establish a confidential reference file with the Virginia Transportation Construction Alliance in connection with my scholarship application.

Applicant

Date

Parent/Guardian (if applicant is under age 18)

Date