

APPLICATION FORM FOR COLLEGE SCHOLARSHIP TED G. WILSON MEMORIAL SCHOLARSHIP FOUNDATION Administered By: Professional Construction Estimators Association PO Box 9146 · Charlotte, NC 28299 (704) 421-4601



- **PURPOSE:** College Scholarship Grant in the amount of \$1,500.00 for the 2024 2025 School Year to a deserving student (High School Senior, College Freshman, Sophomore, or Junior) based on the following threefold considerations: a) Academic Ability, b) Need, c) Desire to enter the Construction Industry.
- **RECIPIENTS**: Shall be limited to students planning to attend a university or college as approved by the Scholarship Committee. Recipients shall pursue a full time course of study leading to a B.S. degree in Construction or Engineering directly related to the Construction Industry.

REQUIREMENTS: 1. Applicant is responsible for ensuring that all items listed below are submitted to the National PCEA Scholarship Committee at the above address.

- A. Completed Application Form
- B. One evaluation form completed by your High School Guidance Counselor or College Faculty Advisor, which ever is applicable at time of the application. High School Principal evaluation acceptable where Counselor information is not available.
- C. One evaluation form completed by an adult not related to the Applicant.
- D. Official Transcript of High School or College grades (see Item II-F of Application) and latest SAT Scores if available.
- 2. Finalists may be interviewed by the Scholarship Committee.
- 3. Deadline for submission of application March 31, 2024.

I. PERSONAL

Α.	Name				
	Last		First	Middle	
В.	Address 1) (Home)				
		Number & Street	City	State	Zip
	2) (College)				
		Number & Street	City	State	Zip
	3) At which a	address can you be	contacted in January?	Home	College
C.	Telephone 1) Home_		2) College _		
	Email Address				
D.	Present Age		E. Date of Birth		
				Month/E	Day/Year
F.	Health				
G.	1) Marital Status_		2) Spouse's Na	ime	
	3) Spouse's Occu	ipation	4) Spouse's An	nual Income \$ _	
	5) Number of Dep	pendents other than	n your spouse		_

H.	1) Parent or Legal Guardian's Name	2) Relationship
	3) Address, if different than B1	
I.	1) Fathers Occupation	2) Annual Income \$
J.	1) Mothers Occupation	2) Annual Income \$
K.	Are you considered a legal dependent by your parents?	Yes No
L.	1) Brothers & Sisters Older Than You2) Young	er Than You
М.	1) Including yourself, how many members of your immed	iate family will be in college next year?
	2) How many are receiving financial assistance in the form	n of scholarships or grants?
II. SCH	IOLASTIC INFORMATION	
A	Provide names, city & state of colleges or universities you Most recent first. Be sure to indicated month and year of	expected graduation.
	1) Four Year College Attended (From-	To) Anticipated Month and Year of Graduation
	A	
	В	
	2) Two Year College A	
	В	
	3) High School A	
	В	
	4) Please provide a chronological history of your activities high school graduation.	s if not continuously enrolled in school since
В.	If you are currently enrolled at a college or university, indi-	cate:
	1) Month & Year of Enrollment	
	2) Current Year in School: Freshman Sophom	ore Junior (Circle One)
C.	If you are not currently enrolled at a college or university, school, list below those colleges to which you have applied	or are planning to transfer to another ed (in order of preference) Anticipated Month & Year
	1) College (Name, City & State) Accepte	d (Yes or No) of Graduation
	A	
	В	
D. E. F.	In what program do you expect to get your degree? Are you enrolled in a co-op education program? Specify Grade Point Average and send an official transcri attending. High School Senior– provide transcript and GF Transfer Student, either high school or college—provide a attended school in addition to any available grades from p cumulative high school GPA, high school transcript and c 1) GPA3, 4, 5 or 6 point scale (circle one)	pt for the school you are presently A based on courses completed to date. a complete transcript from previously present school. College Freshmen provide

G.		xtracurricular activities have you participated in while attending High School and/or e. Indicate elected offices held, if any. Specify purpose of local organization.
	1) Stud	ent Organizations (Student Government, Key Club, etc.)
	2) Com	munity Activities (Boy Scouts, Girl Scouts, etc.)
	3) Athle	etics
		r
III. EMF A.	List bel duties a	ENT HISTORY ow full time employment, summer employment, or part time work, briefly explaining your and responsibilities (beginning with the most recent job). If part time, indicate number of per week. Fromto Firms Name & Type of business
		Address
		Supervisor's Name & Position
		Your Duties
		Salary
	2)	Fromto
		Firms Name & Type of business
		Address
		Supervisor's Name & Position
		Your Duties
		Salary

IV. FINANCIAL INFORMATION (Complete all blanks to the best of your knowledge)

A. Describe briefly, in annual dollar amounts, estimated college costs for:

5) Total	\$
4) Misc (Specify)	\$
3) Books	\$
2) Living Expenses	\$
1) Tuition	\$

B. Indicate the amount if support you get from the following sources annually

1) Family	\$
2) Summer Work	\$
3) Part Time Work	\$
4) Savings	\$
5) Loans	\$
6) Scholarships	\$
7) Other Sources	\$
8) TOTAL	\$

Please explain the purpose for scholarship money will be used _____

V. ADDITIONAL INFORMATION

Answer the following questions using on the space provided:

1) What has been your most important extracurricular activity, your most important contribution to it, and what has your participation in it meant to you as an individual?

Why serie your	are you interested in a consistent of events, has led you to previous work experiences	nstruction industry career, and what event, or o this decision? Where possible, explain how will relate to a construction industry career.
	turnulaturnu liter ta ala in ann	
wnat	t would you like to do in cor	istruction ?
Are a indus		diate family currently employed in the construction
Α.	Name	Relationship
	Employer	
	Position in Company	
B.	Name	Relationship

I agree that this application and all attachments may be used for the purpose of evaluation and selection by the Scholarship Committee of the National PCEA and/or representatives designated by the Scholarship Committee

Signature_

_Date _

Please use an additional sheet to provide any other information that you feel is necessary to complete your application

RATING SHEET

TO BE COMPLETED BY EVALUATOR (Adult, Not Related, Other Than School Official)

Date:			
Name of Student			
	Last	First	Middle Name or Initial
study construction o	r civil engine	reference by the above student who ha ering) from the Professional Construct Your evaluation is important to us in c	ion Estimators Association, Ted G.
Please complete the	form and m	ail it to: National PCEA Scholarship Committe PO Box 9146	ee
		Charlotte, NC 28299	
Name of Evaluator			Title
Employer			
Address			
How long have you	known the ap	pplicant?	
Furnish information	on the nature	e and frequency of your contacts and c	observations of the applicant

EVALUATION OF SOCIAL AND PERSONAL TRAITS

Based on 5 as average on a scale 0-10, please use the numerical values assigned to each category when responding. (Example: An Average evaluation could be rated 4, 5, or 6)

	Below Average (0-3)	Average	Above Average (7-9)	Superior (10)	Notes: Use Reverse Side if Necessary
Cooperation					
Courtesy					
Dependability					
Industriousness					
Initiative					
Leadership					
Maturity					
Self-Control					
Personal Appearan					

Using the above rating scale, indicate your opinion of the applicant's ability to select a goal and achieve it _____

Signature_____

RATING SHEET

TO BE COMPLETED BY GUIDANCE OFFICIAL

Date:		_	
Name of Student			
	Last	First	Middle Name or Initial
study construction or	civil engineerir	erence by the above student who ha ng) from the Professional Constructi Your evaluation is important to us ir	ion Estimators Association, Ted
Please complete the			
	Nat	tional PCEA Scholarship Committee PO Box 9146	<u>}</u>
		Charlotte, NC 28299	
Name of Evaluator			Title
Employer			
Address			
How long have you k	nown the applic	cant?	
Furnish information of	on the nature ar	nd frequency of your contacts and o	bservations of the applicant

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Industriousness					
Initiative					
Leadership					
Maturity					
Self-Control					
Personal Appearan					

Using the above rating scale, indicate your opinion of the applicant's ability to select a goal and achieve it _____

Signature_____