



SCHOLARSHIP APPLICATION

Directions:

Each question must be answered. Place N/A on lines that do not apply to you. Typed applications are encouraged but not required. Applications must be postmarked or emailed no later than **April 30th for fall semester** and **October 30th for spring semester**.

1. Applicant Information

First Name _____ Last Name _____

Mailing Address _____

Town _____ State _____ Zip _____

Email _____ Telephone _____

2. GSRWA Member Information

Name _____ Job Title _____

Member System/Company _____

Mailing Address _____

Town _____ State _____ Zip _____

Member Email _____ Telephone _____

relationship to Applicant _____

3. Educational Data

High School Attended _____

Address _____

Date of Graduation _____ Grade Point Average _____

4. College/University Information (Specify your first choice only)

Status: Incoming Freshman Coursework previously completed

College/University Name _____

State _____ Major _____

A transcript from your most recent educational institution must be submitted with your application. Please contact the GSRWA executive director if there are extenuating circumstances.

5. About Applicant (add space as needed)

- A. Activities:** List up to three extra-curricular activities. Include description, positions of leadership, and years of participation.

- B. Community Service:** List up to three ways you participated in community service. Include sponsoring organizations and total number of contributed hours.

- C. Honors and Awards:** List up to three honors or awards you received related to academics, vocation, or extracurricular activities. Include year(s).

- D. Work Experience:** List your most recent work experience for up to two jobs you have held. (write N/A if not applicable)

Employer	Position	Dates start & end	Hours average per week

- E. Goals:** Describe your academic direction and how that relates to your professional goals. Maximum of 100 words.

- F. Extenuating Circumstances:** (not required) Applicants are invited to write about Extenuating circumstances if they feel it will provide a more complete picture.

6. Certification

In submitting this application, we certify that the information provided is complete and accurate to the best of our knowledge. False information will result in the revocation of any scholarship granted.

Applicant Signature **X** _____ Date _____

Member Signature **X** _____ Date _____
(if applicant is a dependent of the member)

Submit the following documents:

- Completed GSRWA Scholarship Application
- School transcript of grades— If currently a high school or college student
- Letter of Recommendation from GSRWA member supervisor—If currently a GSRWA member employee

Submit to:

Granite State Rural Water Association
PO Box 596
Walpole NH 03608

Or email as attachments to info@granitestatewater.org