NEW YORK STATE ASSOCIATION OF ELECTRICAL CONTRACTORS SCHOLARSHIP AWARDS PROGRAM

♦ NYSAEC Annual Scholarship Award – \$4,000 over four years funded by taxdeductible contributions made by individual member firms.

ELIGIBILITY REQUIREMENTS

- 1. The Scholarship is available only to children and grandchildren of <u>management employees</u> currently employed by NYSAEC member firms. The member firm must be in good standing with NYSAEC for prior 3 years.
- 2. The applicant must be a graduating high school senior, and must plan to be enrolled as a matriculated freshman, sophomore or junior at an accredited two or four year college or university.
- **3.** Field of study is not required to be related to the electrical industry.

APPLICATION PROCEDURES

THE APPLICATION PACKET MUST INCLUDE

- 1. Completed NYSAEC Scholarship application form.
- **2.** High school transcript through completion of first half of senior year. Transcript should include class rank.
- **3.** Official results of ACT and/ or SAT exams.
- 4. Currently enrolled college students must submit official college transcript.
- **5.** Two reference letters, *from persons other than family*, who have observed the applicant and who can comment on his/ her character and abilities.
- 6. Original Essay must be 750 words or less, typed and double spaced, with the applicant's name appearing on each page. Please describe the educational course of study you have chosen and how your future occupation will aid the community in which you live. Include why you feel you would be a good candidate to receive a NYSAEC scholarship award.

SCHOLARSHIP FUND DISBURSEMENT

- 1. The scholarship must be used beginning in the fall of 2023
- 2. Scholarship funds must be used for tuition and will be paid direct to the college at a rate of \$1,000 per year (\$500 each semester) for a maximum of four years.

THE APPLICATION PACKET MUST BE SUBMITTED BY JUNE 20, 2023

INCOMPLETE APPLICATION PACKETS WILL NOT BE REVIEWED

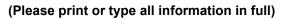
NEW YORK STATE ASSOCIATION OF ELECTRICAL CONTRACTORS

www.nysaec.org



SCHOLARSHIP AWARD PROGRAM

APPLICATION FORM





Name:				
(Last)	(First)	(Middle)		
Address:				
Address:(Street)	(City)	(State)	(Zip)	
E-Mail Address:		_		
Date of Birth:	Telephone:			
Name of Parent:	Occupat	Occupation: (Must be management level position)		
Name of Firm:				
High School:	Graduation Date:			
Please list colleges applied to in order or	preference:			
Name of College	City		<u>State</u>	
Honors and Awards:				
Personal Essay to accompany this form words. Please see note 6 under applicat	•	•	xceed 750	
Signature of Applicant	(Date)	_		
Mail complete application packet to:	NYSAEC Attn: Schol P.O. Box 80 Latham, NY			