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| OHIOAPWALOGONEW2 | *Northwestern Ohio Branch of the APWA* |

# Scholarship Application

## Applicant Information

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Full Name: |  |  |  | Date: |  |
|  | Last | First | M.I. |  |  |

|  |  |  |
| --- | --- | --- |
| Address: |  |  |
|  | Street Address | Apartment/Unit # |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  | | |  |  |
|  | City | | | State | ZIP Code |
| Phone: |  | Email |  | | |
|  |  |  |  | | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| School Year: |  | |  |  |  |  |
| Scholarship Applied for: | |  | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Are you a citizen of the United States? | YES | NO | If no, are you authorized to work in the U.S.? | YES | NO |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Have you ever worked for a public agency? | YES | NO | If yes, when? |  |

## Education

|  |  |  |  |
| --- | --- | --- | --- |
| High School: |  | Address: |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| From: |  | To: |  | Did you graduate? | YES | NO | Diploma:: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| College: |  | Address: |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| From: |  | To: |  | Did you graduate? | YES | NO | Degree: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Other: |  | Address: |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| From: |  | To: |  | Did you graduate? | YES | NO | Degree: |  |

## References

Please list three personal references.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Full Name: |  | | Relationship: |  |
| Company: |  | | Phone: |  |
| Address: |  | | | |
|  |  | |  |  |
| Full Name: |  | | Relationship: |  |
| Company: |  | | Phone: |  |
| Address: | |  | | |
|  |  | |  |  |
| Full Name: |  | | Relationship: |  |
| Company: |  | | Phone: |  |
| Address: |  | | | |

## Military Service

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Branch: |  | From: |  | To: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Rank at Discharge: |  | Type of Discharge: |  |

|  |  |
| --- | --- |
| If other than honorable, explain: |  |

## Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to a scholarship award, I understand that false or misleading information in my application or interview may result cancellation and will require full repayment.

|  |  |  |  |
| --- | --- | --- | --- |
| Signature: |  | Date: |  |

**Please attach a 300-word essay outlining how your field of study is connected to the field of Publicly Owned Infrastructure or explaining how your plans fit the scholarship you are applying. Please list all experience you have relating to the field of public service and managing publicly owned Infrastructure or why this scholarship should be awarded to you. Also, attach proof of acceptance into an accredited institution’s secondary education program.**

**Deadline is March 15, 2021**

Submit to: [kim.roessner@dot.ohio.gov](mailto:kim.roessner@dot.ohio.gov)

Mailing address: Kim Roessner, 317 East Poe Road, Bowling Green, OH 43402