



ALABAMA SOCIETY OF PROFESSIONAL LAND SURVEYOR'S SCHOLARSHIP FUND APPLICANT

The Board of Directors for the Alabama Society of Professional Land Surveyor's Scholarship Fund appreciates your interest in applying for this scholarship. Minimum requirements for this scholarship include:

- ◆ Applicant must be working towards a four year degree in Surveying and Geomatics Sciences at **Troy University** and must have already completed two semesters. If at any point the student withdraws from the Surveying and Geomatics Sciences program, any remaining funds will be returned to the Alabama Society of Professional Land Surveyor's Scholarship Fund. Applicant should have a genuine interest in Land Surveying in the State of Alabama as a profession.
- ◆ Applicant must have a cumulative grade point average of 2.5 or higher.
- ◆ Applicant must be a legal resident of the State of Alabama for the preceding 2 years.
- ◆ Applicants must submit the application form, a sealed transcript from Troy University, and letters of recommendation.

A clear understanding of your previous involvement, experiences, accomplishments, academics and otherwise, will enable us to make the best decision possible. Parts I and II of this form are to be completed by you, Part III by your parents, and Parts IV, V, and VI are to be completed by your counselor or principal. All six parts should be mailed together to:

The Alabama Society of Professional Land Surveyors
3416 Primm Lane
Birmingham, AL 35216

Submission deadline is September 11, 2018. Finalists will be notified by the ASPLS Executive Office or the Education/Scholarship Committee to schedule an interview.

The recipient of this scholarship must enroll in Troy State University by the second semester of the 2018 – 2019 school year, or all scholarship money will be forfeited. Extenuating circumstances will be considered. Upon the recipient's enrollment in college, the scholarship money will be forwarded to his or her chosen college in pro rata payments over two semesters or three quarters. If a scholarship recipient decides to discontinue his or her education, any remaining funds will be returned to the Alabama Society of Professional Land Surveyor's Scholarship Fund.

Have you been awarded other scholarships or received other financial aide? If so list the amount and the source:



Attach a recent Photograph

**ALABAMA SOCIETY OF PROFESSIONAL LAND SURVEYOR'S
SCHOLARSHIP FUND APPLICATION**

I. STUDENT INFORMATION (THE INFORMATION SUBMITTED WILL BE HELD IN CONFIDENCE)

APPLICANT'S NAME _____ DATE _____

HOME ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE _____ SOCIAL SECURITY NUMBER _____

SCHOLASTIC STATUS _____ AGE _____

LIST 3 PERSONAL REFERENCES:

NAME, ADDRESS & TELEPHONE _____

NAME, ADDRESS & TELEPHONE _____

NAME, ADDRESS & TELEPHONE _____

PLEASE LIST ON A SEPARATE SHEET:

1. HONORS AND AWARDS
2. EXTRACURRICULAR ACTIVITIES AND CLUBS (INDICATE YEARS OF INVOLVEMENT, ANY OFFICES HELD, AND WHETHER THE POSITION WAS ELECTED OR APPOINTED)
3. COMMUNITY ACTIVITIES

WORK EXPERIENCE:

| DATES | EMPLOYER | KIND OF WORK | HOURS PER WEEK |
|-------|----------|--------------|----------------|
|-------|----------|--------------|----------------|

DESCRIBE YOUR OTHER WORK ACTIVITIES (SUCH AS WORK AT HOME, FAMILY FARM, FAMILY BUSINESS, ETC.)

II. ESSAY *** ON A SEPARATE SHEET OF PAPER ,WRITE A SHORT ESSAY ON WHY YOU WOULD LIKE TO RECEIVE THIS SCHOLARSHIP. THIS MUST BE SUBMITTED WITH THE COMPLETE APPLICATION (PARTS I-VI).



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III. Family Financial Profile

For Use in Establishing Financial Need (The information submitted will be held in confidence)

APPLICANT'S NAME: _____

NUMBER OF FAMILY MEMBERS LIVING AT HOME
(FOR WHOM PARENTS ARE FINANCIALLY RESPONSIBLE): _____

FATHER: _____

MOTHER: _____

SIBLINGS: _____ AGE: _____

_____ AGE: _____

_____ AGE: _____

_____ AGE: _____

(Use back of page if more space needed.)

TOTAL COMBINED INCOME: (Please check the appropriate box)

\$10,000 - 19,999 \$20,000 - 29,999 \$30,000 - 39,999 \$40,000 - 49,999 \$50,000 - 59,999

\$60,000 - 69,999 \$70,000 - 79,999 \$80,000 - 89,999 \$90,000 & Over

FATHER'S EMPLOYER: _____

ADDRESS: _____

MOTHER'S EMPLOYER: _____

ADDRESS: _____

YOUR EMPLOYER: _____

ADDRESS: _____

PROVIDE THE AMOUNT OF INCOME FROM THE FOLLOWING: (if applicable)

CHILD SUPPORT: _____

DISABILITY: _____

SOCIAL SECURITY: _____

AID TO DEPENDANT CHILDREN: _____



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OBJECTIVE CRITERIA LIST

APPLICANT'S NAME: _____

This form (parts IV, V, and VI) is to be signed by the applicant's counselor or principal. It is to be returned with parts I, II, and III to the address listed in applicant information by the date specified.

IV. College entrance examination score:

ACT composite score _____

SAT combined score _____

V. Applicant's cumulative high school grade or college point average (GPA) excluding spring term, senior year _____

Applicant's rank in class _____

VI. Please attach a transcript.

PRINCIPAL OR
COUNSELOR _____

DATE _____