

The Arizona Roofing Industry Foundation



The Program:

The Arizona Roofing Contractors Association (ARCA) has established a scholarship program to assist employees, immediate family members of employees, or the immediate family of ARCA members who plan to pursue post-secondary education in college and vocational programs. Scholarships will be offered each year for full-time study at any accredited post-secondary institution of the student's choice.

Eligibility

Applicants to the Arizona Roofing Industry Education Foundation must be an ARCA Member's:

- *full-time employee*
- *full-time employee's spouse, OR*
- *full-time employee's child (natural, legally adopted or a stepchild)*

who is either:

- *a high school senior or graduate planning to enroll in a full-time undergraduate course OR*
- *a student already enrolled in a full-time undergraduate course*

at an accredited two or four year college, university or vocational/technical school.

Awards

Two scholarships will be awarded this year in the amount of \$2,500.00 each. Payment is made in August and checks will be mailed to the bursar of the school where the scholarship winner will do his or her undergraduate work.

Application

Interested students must complete the attached application and mail it along with a current complete transcript of grades to ARIF postmarked no later than May 1, 2011. Application may be reproduced as needed.

Applicants are responsible for gathering and submitting all necessary information. Applications are evaluated on the information supplied; therefore, answer all questions as completely as possible. All information received is considered confidential.

Selection Of Recipients

Scholarship recipients are selected on the basis of academic record, potential to succeed, leadership and participation in school and community activities, honors, work experience, a statement of educational and career goals, and an outside appraisal. Financial need is not considered.

Final selection of recipients is made by the ARIF Board of Directors. Award recipients will be notified by June 15. Not all applicants to the program will be selected as recipients. Students may reapply to the program each year they meet the eligibility requirements.

Revisions

The Arizona Roofing Industry Foundation reserves the right to review the conditions and procedures of this scholarship program and to make changes at any time including termination of the program.

Additional Information

Questions regarding the scholarship program should be addressed to:

Arizona Roofing Industry Foundation | 5050 North 8th Place, Suite 6 | Phoenix, AZ 85014
Telephone: (602) 335-0133 | Fax: (602) 335-0118 | Website: <http://www.azroofing.org>

2011 ARIF Scholarship Program

Type or print all information except for signatures. If space provided in any section is inadequate, information may be continued on additional sheets of paper. Attach additional sheets to the original document.

Application Postmark Deadline is May 1, 2011

Personal

Last Name _____ First Name _____ Middle Initial _____ D.O.B. _____

Home Address _____ City _____ State _____ Zip _____

Phone _____ Soc. Sec. Number _____ Marital Status _____ Number of Dependents _____

Employee, Parent or Guardian Information

Last Name _____ First Name _____

Employer _____ City _____ State _____ Zip _____

Work Phone _____ Relationship to Applicant _____

High School Data

School Name _____ Graduation Date _____

School Telephone _____ City _____ State _____

Transcript Information

1. Students currently or previously enrolled in college or vocational/technical school must include all college or vocational/technical transcripts of grades.
2. High School seniors and students who have completed less than two full semesters of post-secondary education must include a high school transcript of grades and GPA based on courses to date.

Certification

In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. If requested, I agree to give proof of the information I have given on this form. Falsification of information may result in termination of any scholarship granted. This application becomes property of ARIF.

Student Signature _____ Date _____

Application Checklist

Applicant is responsible for insuring that all items listed below are submitted to the Arizona Roofing Industry Foundation and postmarked by May 1, 2011.

- Completed Application
- Evaluation Form
- Official Transcripts Of High School And/Or College Grades

Post-Secondary School Data

Fill out the name and location of the post-secondary school you plan to attend. (If unknown, please list in order of preference the schools to which you have applied.) Use official school names.

School _____ City _____ State _____

School _____ City _____ State _____

Type of School Four-Year College Or University Two-Year Community Or Junior College Vocational/Technical School Other _____

Anticipated Graduation Date _____ Enrollment Date _____ Major or Course of Study _____

Work Experience

Describe your work experience during the past four years. Indicate dates of employment and number of hours worked each week.

Employer/Position	Start Date (mm/yy)	End Date (mm/yy)	Hours Per Week	Amount Earned

Volunteer Experience

Describe any volunteer experience during the past four years. Indicate dates of participation and number of hours each week.

Organization/Position	Start Date (mm/yy)	End Date (mm/yy)	Hours Per Week

Activities, Awards and Honors

List all activities, school and community, in which you have participated during the last four years. Indicate whether high school or college.

Activity	Years Active	Special Awards/Honors	Offices Held

Essay Questions

On a separate sheet of paper, please type your responses to the following questions, limiting your submissions to 250 words or less.

1. Why are you interested in your career choice, and what event (or series of events) has led you to this decision?
2. What has been your most important extracurricular activity? What has been your most valuable contribution to it, and what has your participation in it meant to you as an individual?

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Application Evaluation

This page is to be completed by a high school or college counselor or advisor, an instructor, or a work supervisor who knows the applicant well. The information provided on this page will serve to support this application for the ARIF Scholarship. The following statements are to be given serious attention and consideration. Answers are to be typed or printed using black ink.

Once completed, this page should be returned to the applicant or forwarded directly to the foundation (postmarked no later than May 1, 2011): **ARIF Scholarship Program, 5050 North 8th Place, Suite 6, Phoenix, AZ 85014**

Applicant's Name _____ Name of Evaluator _____

Relationship to Applicant _____ How long have you known the applicant? _____

Occupation/School _____

Address _____ City _____ State _____ Zip _____

Describe the nature and frequency of your contacts and observations of the applicant.

The applicant's choice of post-secondary educational program is extremely appropriate appropriate inappropriate

The applicant's achievements reflect his/her ability extremely well well poorly

The applicant's ability to set realistic and attainable goals is excellent good poor

The quality of the applicant's commitment to school, work and/or community is excellent good poor

The applicant demonstrates curiosity and initiative extremely well well poorly

The applicant demonstrates good problem-solving skills, follows through and completes tasks extremely well well poorly

The applicant's respect for self and others is excellent good poor

Additional comments: _____

Evaluator Signature _____ Date _____