



SCHOLARSHIP APPLICATION

Send by mail to:

Alabama AGC Scholarship Fund P.O. Box 102066 Irondale, AL 35210

or email to:

elizabethm@alagc.org

CTITIENT INTECTM ATTON

Applicants must meet all of the following requirements:

- Must be a resident of Alabama
- 2. Must be enrolling in, or attending, a community college, technical school or university in Alabama
- 3. Must be enrolled/enrolling in a construction-related curriculum
- 4. Application must be received by November 30
- 5. Must be recommended by an AGC Member

STODENT INTORMATI			
Name			
Permanent Address			
City		State	Zip
Date of Birth	Tele	ohone Number	
Email			
ACADEMIC INFORMA' Name / Address of high school atte	ended		
Graduation Date			
School / College Planning to Atten	d		
Note: You must a	attend a school in Alabam	a to be considered for the scl	holarship.
Are you currently enrolled in this so	chool? OYes	○ No	
If so, what will be your status in the	e fall? OFres	hman OSophomore	OJunior OSenior
Will you / do you work while attenc	ding school?	If so, where?	
How many hours do you work per v	week?		
Planned / Current field of study			

Note: Planned field of study must be construction-related. Consideration will be given to students who plan to study in the two-year trades and those four-year students already accepted into their construction-related intended field of study.

Career Objective	
FAMILY INFORMATION	
	ss / guardians pay your expenses)? O Yes O No
	nd sibling information below. If no, skip to spouse information.
ather O Living O Deceased	Name
ddress	
ity	State Zip
Occupation	
4 · 1 · 0 · 1 · · · · 0 · D	
· ·	Name
	CL . 7
•	State Zip
occupation	
pouse ○ Living ○ Deceased ○	Not Applicable
· -	
Occupation	
lumber of Dependents	Age(s) of Dependents
ASSET INFORMATION	
, ,	cation? Please fill in percentage totals that apply. % Family Contribution. Combination totals must equal 100%)
·	6 Family Contribution. Combination totals must equal 100%
% Loans	A 1 1111 1 1 - C 11
% Scholarships	Additional Information
% Personal Contributions	

Is any member of your family an AGC Member?	○Yes ○No
If YES, who?	Chapter / Section
If NO, reccomended by what AGC Member?	
Please describe your career goals as they relate to	the construction industry
and what this scholarship award means for you	
Applicant must provide the following:	
Copy of college or high school transcripts (whiche	ver is most recent)
Minimum of one letter of recommendation	
Proof of residency (example: copy of state issued i	dentification/license, etc.)
CERTIFICATION AND AUTHORIZATION	
	his application is true and correct. Lauthorize the
I hereby certify that the information contained in t	on of this application as it deems appropriate, to
,	
	nstitutions referred to in the application. I also give
•	on to the scholarship committee by any academic
	ding or quality grade information, as well as infor-
· ·	nderstand that the falsification of any information
. ,	from further consideration or receipt of funds from
the scholarship.	
Signature of Applicant	Date