



## **Essay Questions**

On a separate sheet of paper, with your name in the top right of each page, answer the following three questions.

1. Describe your volunteer experiences, responsibilities, positions of leadership, time and involvement.
2. Name a person in Society that you admire and the qualities they exemplify that you hope to emulate in your life.
3. Detail your career aspirations, how you anticipate achieving these life goals, and your preparation for them.

## **Adult References**

Please provide three adult references using the attached forms. Prior to distributing the forms, place your name at the top of the page then place your signature at the bottom of the page.

Each reference form is to be sent directly to the association office by the individual completing the reference. Adult Reference Forms must be returned to the association office **no later than March 1, 2017**.

## **Scholarship Eligibility**

To be eligible to participate, the student must be a dependent of a York Builders Association member in good standing; or a dependent of an employee of the member company. Contact the York Builders Association office with questions regarding eligibility. Grandchildren of York Builders Association members are eligible. The student can be a high school senior in a school other than one located in York County.

Only senior high school students are eligible, those students already in a post high school course of education are not eligible. The applicant must intend to enroll in a post high school institution as a full-time student.

The applicant may be required to be present for an interview.

The students chosen to receive scholarships will be selected by the association's Associates Committee. Their selection will be determined based on the information provided on the application forms received but without the committee's knowledge of the names or address of those applying.

The presentation of awards will occur in April or May as determined by the Committee.

The stipend will not be distributed until the successful completion of the applicant's first semester with proper documentation received indicating completion of the prior semester with the prerequisite grades.

Any scholarship award not distributed shall be "rolled over" for distribution the next year. (Approved by the Board of Directors November 19, 2003)

Three students from the York County School of Technology or other dedicated trade schools/programs in York County will be extended one \$250 gift certificate when named honoree of their department. The committee will reach out to specified schools/programs to request names of eligible students.

If you have any questions regarding the criteria used for determining the successful applicant, please contact Melissa Longenberger at 767-2444 X102 or [Melissa@YorkBuilders.com](mailto:Melissa@YorkBuilders.com).

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## **Picture Release**

I, as parent/guardian of \_\_\_\_\_, do hereby authorize the York Builders Association to take photographs of her/him and authorize the York Builders Association and their assigns and transferees to use and publish the same (including use and publication with my name, no name, or a fictitious name, use in the form taken or with intentional or unintentional alternations, and for the purpose of publicity.) I will not receive any compensation or consideration.

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_



# Adult Reference Form

Student's Name: \_\_\_\_\_

The York Builders Association wants to recognize young adults who have demonstrated a desire to excel in our community by helping them further their education with a scholarship. The above student has applied for our scholarship. Please help us to understand this student better by completing this form.

Please return form directly to the York Builders Association no later than **March 1, 2017**.

Mail completed form to: York Builders Association  
Scholarship Program  
540 Greenbriar Road  
York, PA 17404

Adult Reference Name: \_\_\_\_\_

Daytime Telephone Number: \_\_\_\_\_

Agency/Organization/Company: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

Please comment on the student's responsibilities, time involvement, commitment, and character. Please use the back of this page to share additional comments.

	Poor					Outstanding				
Time commitment	1	2	3	4	5	6	7	8	9	10
Enthusiasm	1	2	3	4	5	6	7	8	9	10
Dependability	1	2	3	4	5	6	7	8	9	10
Attitude	1	2	3	4	5	6	7	8	9	10
Other_____	1	2	3	4	5	6	7	8	9	10

I hereby authorize the person named above to release information concerning my activities.

Student's Signature: \_\_\_\_\_

Questions regarding the completion of this form or the York Builders Association Scholarship program can be directed to Melissa Longenberger.