



Engineering General Contractors Association Foundation Inc.
Associated General Contractors of America – San Diego Chapter

AGC Apprenticeship Scholarship Application

This application is ONLY for the following scholarship:

The EGCA Foundation, Inc. and AGC San Diego Chapter is offering up to **three \$1,000 scholarships** (*value noted below*) to a qualified applicant in the AGC Apprenticeship Program.

- \$300 value toolbox and boot voucher at the completion of the “boot camp”
- \$700 paid at the completion of one year in the Apprenticeship Program

Eligibility:

- Must be 18 years old upon Apprenticeship Indenture Date
- Must have a Social Security ID Card
- Must have a high school diploma, GED or equivalent
- Must be an applicant to enter the AGC Apprenticeship Program in one of the following trades:
 - Carpenter
 - Cement Mason
 - Operating Engineer
 - Laborer

Final Filing Date: April 26, 2019

How Applications Are Judged

Selections will be based on overall worthiness of the applicant. The EGCA Scholarship Selection Committee will consider schooling, work experience, community service, extra-curricular activities, career goals, and all information submitted with the application. Finalists will be invited to participate in a mandatory personal interview with the Scholarship Selection Committee on **May 6, 2019**. Applicants selected to attend the interview will be advised of the time and location. **Selected applicants must appear in person on the day of the interview.**

Award Notification

Scholarship recipients will be notified of their award by **May 15, 2019**. To receive the funds, the applicant must complete the AGC Apprenticeship Bootcamp and complete one year in the Apprenticeship program. The student must plan to attend the awards ceremony to receive their scholarship on August 15, 2019 at 5:30 PM. (location will be announced separately)

Demographics:

Applicant's Name (Please print) _____
First Initial Last

Home Address _____
Street City Zip Code

Telephone Number _____ Email _____
One number where you can **always** receive calls or messages

Date of Birth _____ School Last attended _____

Located in what city _____ State _____ Did you graduate? _____

Do you have a current CA Driver's License? _____

Are you a Veteran with an Honorable Discharge? _____

Sign your name here X _____
This application is no good without your signature.

Ethnicity

Please indicate how you identify yourself. _____

Choices:

American Indian or Alaska Native
Asian
Black or African American
Filipino
Hispanic or Latino

Native Hawaiian or Pacific Islander
White
Other (Please Describe)
Decline to State

Primary Language:

Please provide the primary language spoken at home _____

High School Graduation Date:

Please enter the year you graduated or will graduate from high school _____

How did you learn about the EGCA Apprenticeship Scholarship? _____

Apprenticeship Program; Start and Completion Date: Selected Craft _____

Start Date _____ Projected Completion Date _____

Briefly describe any prior construction work experience? _____

Why are you choosing a career in construction? _____

Work Experience:

Work Experience #1 (Most recent)

Place of employment _____

Beginning and end dates _____
Beginning End

Person who supervised you _____
Name Email

Work Experience #2

Place of employment _____

Beginning and end dates _____
Beginning End

Person who supervised you _____
Name Email

References:

1st Reference Name

Full Name of your reference _____
First Last Telephone Number

Reference email _____

Relationship _____

If you are currently in high school:

School Reference Name (Teacher, Administrator, School Counselor, Coach)

Full Name of your reference _____
First Last Telephone Number

Reference email _____

Relationship _____

Essays:

Essay Question 1-

Why are you choosing to enroll in an apprenticeship program? (Our fair review process requires you to stay anonymous.)

Essay Question 2 –

Describe a challenge that you may face while enrolled in your apprenticeship program. Which personal and outside resources will you rely on to overcome this challenge?

If you feel there is something more that we should know about you that is not reflected in other parts of this application, then please provide a brief overview.

Financial Information:

Father/Guardian Name & Address:

Please enter the first and last name and address of your father/guardian, or NA if not applicable.

First and last name	Street Address	City	State	Zip Code
---------------------	----------------	------	-------	----------

Mother/Guardian Name & Address:

Please enter the first and last name and address of your father/guardian, or NA if not applicable.

First and last name	Street Address	City	State	Zip Code
---------------------	----------------	------	-------	----------

Gross Household Income:

Please enter the gross combined income of everyone living in your household from the list below.

Amount

Less than \$30,000
\$30,001 - \$50,000

\$50,001 - \$75,000
\$75,001 - \$100,000

\$100,001 or more
Decline to state

If you feel compelled to share any financial hardships that are not reflected in other parts of this application, then please provide a brief overview.
