



# **Education Foundation**

## **Scholarship Award Instructions**

### **2010/2011 School Year**

It is the intention of the CETA Education Foundation to award six (6) scholarships to qualified applicants in a fair and impartial manner. The Foundation will award two scholarships in each of the following eligible membership classes: Manufacturers, Suppliers & Distributors. Scholarships will be awarded based on independent ranking of applicants by an independent, accredited university. In the event a qualified applicant cannot be identified in one or more of the membership classes, the Trustees will award a scholarship "At Large" to the remaining applicant(s) with the highest ranking(s) regardless of his or her membership class. In an effort to maximize scholarship distribution among the CETA membership, the Trustees may, at their discretion, award the "At Large" scholarship to remaining highest ranked applicant in a manner that restricts awards to one per company per scholarship year.

To be considered for a CETA scholarship award, your completed application must be received at the CETA office by the close of business, **April 20, 2010**. Applications must be complete. Evaluation and selection will be based on the following criteria:

#### **MATERIALS TO BE FURNISHED BY THE CANDIDATE:**

1. Application Form
2. Completed Essay Form
3. Activity and Leadership Record
4. Work Activity Record

#### **DOCUMENTS MUST BE SUPPLIED TO THE CETA EDUCATION FOUNDATION DIRECTLY FROM INSTRUCTORS AT THE REQUEST OF THE CANDIDATE:**

1. Official high school or college/university transcript.
2. Official SAT, ACT, GRE, GMAT, or LSAT test scores.
3. **UNDERGRADUATE STUDENTS ONLY**  
Evaluations from Science/Mathematics and Humanities Instructors.  
(If time constraints do not allow completion of this section, please explain reasons in writing.)

**PLEASE NOTE:** *Applicants are responsible for assuring all transcripts, test scores, etc., are received at the CETA office no later than April 20, 2010*

## **Award Presentation**

CETA Education Foundation scholarship awards will be sent directly to the cashier of each recipient's college or university. The awards are not renewable; however, candidates may reapply in successive years.

The top six scoring applicants based on the rules will each be awarded a scholarship. In the case of a tie, the scholarship award will be shared equally among the tied applicants.

#### **Mail Completed Scholarship Application Materials to:**

CETA Education Foundation  
P O BOX 1710  
Indian Tail NC 28079  
Phone: (800) 441-0111 ■ (704) 635-7362 ■ Fax: (704) 635-7363

**This application is valid for the 2010-2011 scholarship competition only.**



# CETA Education Foundation

P O BOX 1710 ■ Indian Trail NC 28079  
Phone: (800) 441-0111 ■ (704) 635-7362 ■ Fax: (704) 635-7363

## Scholarship Award Application 2010-2011

**Application Packet Must Be Received at the CETA Administrative Office  
No Later Than Close of Business on April 20, 2010**

### Name

\_\_\_\_\_ Last First Middle Social Security No.

### Address

\_\_\_\_\_ Street City State/Province Zip/Postal Code

Phone Number (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

### HIGH SCHOOLS ATTENDED

\_\_\_\_\_ Name City State/Province Years Attended

Class rank: \_\_\_\_\_ in a class of \_\_\_\_\_ students.

### COLLEGE or UNIVERSITY

(Attach a copy of your most current high school or college transcript)

Classification as of coming fall term (circle one) Freshman Sophomore Junior Senior

Major: \_\_\_\_\_ Expected Graduation Date: \_\_\_\_\_

School(s) Attended	Dates Attended	Sem. Hrs. Completed	Grade Point Average	
			overall avg. scale	major avg. scale
_____	____/____ - ____/____	_____	____/____	____/____
_____	____/____ - ____/____	_____	____/____	____/____
_____	____/____ - ____/____	_____	____/____	____/____
_____	____/____ - ____/____	_____	____/____	____/____

**\*REQUIRED: Official Transcripts and SAT, ACT, GRE, GMAT or LSAT scores.**

### EDUCATIONAL PROGRAM

Describe the educational program for which you are seeking this scholarship, including: the name of the institution sponsoring the program, the subject matter or area of study, how long it will take to complete, and what degree will be awarded upon completion.

### PLANNED OCCUPATION OR PROFESSION:

I am an employee, or a family member of an employee, of a CETA Member firm.  
Please indicate firm \_\_\_\_\_

**IMPORTANT!** I have read the scholarship guidelines and procedures on the instruction page of this application and ask that I be considered for a CETA Foundation Scholarship Award with full understanding of the conditions. Also, I give my permission for release of information requested from my high school, college or university. This may include evaluations by high school instructors, university or graduate school professors, SAT, ACT, GRE, GMAT, or LSAT scores, and other information related to determining my qualifications for an award. I understand that evaluations will be kept confidential, and I waive any right of access to them.

Signature \_\_\_\_\_

Date \_\_\_\_\_



# **CETA**® Education Foundation

P O BOX 1710 ■ Indian Trail NC 28079  
Phone: (800) 441-0111 ■ (704) 635-7362 ■ Fax: (704) 635-7363

## **Scholarship Award Application 2010-2011**

**Application Packet Must Be Received at the CETA Administrative Office  
No Later Than Close of Business on April 20, 2010**

### **ESSAY**

Name: \_\_\_\_\_

As part of your application response, you are requested to prepare an essay containing 500 words or less, describing your educational and career goals. Your essay can be written in the space below or attached to this form for submission.

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Signature

Date



# **CETA** Education Foundation

P O BOX 1710 ■ Indian Trail NC 28079  
Phone: (800) 441-0111 ■ (704) 635-7362 ■ Fax: (704) 635-7363

## **Scholarship Award Application 2010-2011**

**Application Packet Must Be Received at the CETA Administrative Office  
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### **ACTIVITY AND LEADERSHIP RECORD**

Name: \_\_\_\_\_

**Describe your participation in academic and/or community activities such as clubs, competitions, government, sports, honors, awards or prizes.**

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**Describe leadership positions held in the above activities or in other situations.**

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Signature

Date





# CETA Education Foundation

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Phone: (800) 441-0111 ■ (704) 635-7362 ■ Fax: (704) 635-7363

## Scholarship Award Application 2010-2011

**Application Packet Must Be Received at the CETA Administrative Office  
No Later Than Close of Business on April 20, 2010**

### SCIENCE/MATHEMATICS EVALUATIONS (For Undergraduate Applicants Only)

To be completed by a Science or Mathematics instructor and returned directly to:

**CETA EDUCATION FOUNDATION**

P O BOX 1710 ■ Indian Trail NC 28079  
Phone: (800) 441-0111 ■ (704) 365-7362 ■ Fax: (704) 365-7363

Candidate's Name: \_\_\_\_\_  
Name of Evaluator: \_\_\_\_\_ Academic Area: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Courses You Have Taught This Candidate: \_\_\_\_\_  
School Name: \_\_\_\_\_  
School Address: \_\_\_\_\_  
School City, State, and Zip: \_\_\_\_\_

### GENERAL RATINGS

Please evaluate the candidate in terms of the following characteristics by placing a check mark (✓) under the appropriate heading. In determining these ratings, please compare this candidate with all other individuals you have taught.

	Good (Above Average)	Excellent (Top 15%)	Outstanding (Top 5%)
Academic Motivation	_____	_____	_____
Academic Creativity	_____	_____	_____
Academic Growth Potential	_____	_____	_____
Leadership	_____	_____	_____
Peer and Instructor Interaction	_____	_____	_____
Emotional Maturity	_____	_____	_____

Other information that might be helpful in evaluating this candidate.

\_\_\_\_\_

\_\_\_\_\_  
Evaluator's Signature

\_\_\_\_\_  
Date



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## Scholarship Award Application 2010-2011

**Application Packet Must Be Received at the CETA Administrative Office  
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### HUMANITIES EVALUATION

**(For Undergraduate Applicants Only)**

To be completed by a Humanities instructor and returned directly to:

**CETA EDUCATION FOUNDATION**

P O BOX 1710 ■ Indian Trail NC 28079  
Phone: (800) 441-0111 ■ (704) 635-7362 ■ Fax: (704) 365-7363

Candidate's Name: \_\_\_\_\_  
Name of Evaluator: \_\_\_\_\_ Academic Area: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Courses You Have Taught This Candidate: \_\_\_\_\_  
School Name: \_\_\_\_\_  
School Address: \_\_\_\_\_  
School City, State, and Zip: \_\_\_\_\_

#### GENERAL RATINGS

Please evaluate the candidate in terms of the following characteristics by placing a check mark (✓) under the appropriate heading. In determining these ratings, please compare this candidate with all other individuals you have taught.

	Good (Above Average)	Excellent (Top 15%)	Outstanding (Top 5%)
Academic Motivation	_____	_____	_____
Academic Creativity	_____	_____	_____
Academic Growth Potential	_____	_____	_____
Leadership	_____	_____	_____
Peer and Instructor Interaction	_____	_____	_____
Emotional Maturity	_____	_____	_____

Other information that might be helpful in evaluating this candidate

\_\_\_\_\_  
\_\_\_\_\_

Evaluator's Signature

Date