

# Oswego County School Facilities Association

## Scholarship Application

It is the intent of the Oswego County Chapter of the New York State School Facilities Association (NYSSFA) to provide scholarships to deserving students pursuing a degree in the fields of facility management, building maintenance, construction trades or construction management. The members of the Oswego County Chapter intend to award multiple \$500.00 scholarships this year.

### To The Applicant:

By completing the information required in this application you will enable us to determine your eligibility to receive funds provided specifically to help students planning to go on to higher education in the area of facilities management, building maintenance, construction trade school or construction management.

You must complete the initial sections of this application. Then forward the application to the individual at your school who will complete the section titled "Transcript Information".

In addition to the completed application form, please provide a letter of recommendation from your teacher, counselor or school administrator, which supports your request for scholarship assistance.

You are responsible for seeing that all documents are completed and submitted.

**\*Deadline:** May 30, 2021

**\*Reminder:** This application becomes valid only when all requested information has been completed and all requested documents have been received. Please do not include documents other than those requested.

### Applicant Data:

Full Name: \_\_\_\_\_  
Last Name First Name Middle Initial

Social Security Number -----

Permanent Address: \_\_\_\_\_  
Street  
\_\_\_\_\_  
City State Zip Code

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Telephone Number:(\_\_\_\_)\_\_\_\_\_



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## Personal Data:

List all school and community activities, in which you have participated during the past four years (student government, music, sports, Red Cross, church work, scouting programs, clubs, etc.)

Activity	Number of years of participation	Special Awards, Honors



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## School Data:

High School attended: \_\_\_\_\_

Address: \_\_\_\_\_

Graduation Date: Mo. \_\_\_\_\_ Yr. \_\_\_\_\_ School phone number: \_\_\_\_\_

Name of post-secondary school planning to attend:

\_\_\_\_\_

Type of post-secondary school:

\_\_\_\_\_ 4yr. College/University    \_\_\_\_\_ Vo-Tech    \_\_\_\_\_ Community College

Other type of post-secondary school: \_\_\_\_\_

Student will live:    \_\_\_ On Campus    \_\_\_ Off Campus    \_\_\_ Will Commute

Enrolled:    \_\_\_ Less than half time    \_\_\_ Half time    \_\_\_ Full time

Anticipated date of graduation from post-secondary program: Month \_\_\_\_\_ Year \_\_\_\_\_

Major field of study applicant plans to pursue: \_\_\_\_\_

**Please report any unusual family or personal circumstances you feel warrant attention (ie: financial issues, disability, etc.):**

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

**Other Awards:** Please list below the name and amount of any grants or scholarships that you have been awarded for the coming school year:

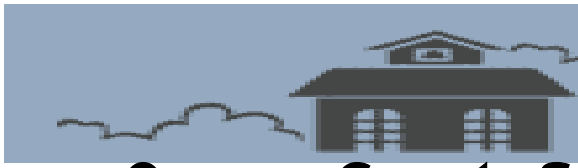
Name of Award	Amount	Granted	Pending



## **Oswego County School Facilities Association**

**Write an Essay:** (In your essay, creatively persuade the scholarship committee on the following):

- 1. Your background in your program of study field.**
- 2. Any personal, interesting aspect of how you became interested in your program of study.**
- 3. Why should you be the recipient of the grant?**
- 4. Your future career goals and aspirations.**



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## Transcript Information:

Currently enrolled post-secondary students must include college or vo-tech transcript of grades after completing one full semester of post-secondary education. Also, include a high school transcript of grades.

I certify this data is from a current and official transcript.

<b>Counselor's Signature</b>	Date	Title	Telephone Number

In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge.

*Falsification of information may result in termination of any scholarship granted.*

Applicant's Signature	Date

**Return completed application to:**

**Mr. Andrew Ridgeway**  
**P.O. Box 248**  
**124 Salisbury Street**  
**Sandy Creek, NY 13145**