

APPLICATION FORM
JOSEPH A. LEVENDUSKY MEMORIAL SCHOLARSHIP

Sponsored by

EPICOR, INCORPORATED and the INTERNATIONAL WATER CONFERENCE®

Notice to Applicants:

This Scholarship, with funding up to \$7,000 per year, will be awarded to an undergraduate student in mechanical or chemical engineering who meets the following criteria and requirements:

- Demonstrated interest and commitment to seek a career in the field of water technology. (Environmental wastewater, water pollution control and water resource management not included.)
- Acceptance for enrollment in, or be enrolled in good standing as a student in an accredited institution.

Type or clearly print. Fill in all questions to the best of your knowledge. Approximate financial figures will be accepted. Applications will not be accepted without completed form and signature.

Applications are to be returned by **September 1, 2009** to:

Engineers' Society of Western Pennsylvania
Attention: Scholarship Committee
337 Fourth Avenue
Pittsburgh, PA 15222

Selection will be made by October 2, 2009

Name of Applicant _____ SS# _____

Permanent Address No. & Street/P.O. Box _____

City _____ State _____ Zip _____

Temporary Mailing Address (until what date _____) Telephone (add area code) _____

No. & Street/P.O. Box _____

City _____ State _____ Zip _____

Telephone (add area code) _____

Date of Birth _____ Marital Status _____ U.S. Citizen _____ Other _____

I certify that the answers herein are true and complete to the best of my knowledge.

Signature

Date

EDUCATIONAL INFORMATION

University/College to which you have been accepted

Address

No. & Street/P.O. Box _____

City _____ State _____ Zip _____

Freshman____ Sophomore____ Junior____ Senior____

Transfer____ Re-Admission____

Class Rank

Other University/College attended with completed semesters, class standing and course of study.

Total college credits earned to date _____

Verification of acceptance and transcripts must accompany this form.

Degree Major _____ Anticipated Graduation Date _____

REFERENCES

List two professional and two personal references. Letters of recommendation may be attached to this form, or the reference may be sent directly to the Scholarship Committee. Do not use family members as references.

Professional (Give name, company affiliation, address, phone and length of time known)

Name Company Time Known

Address Telephone

Name Company Time Known

Address Telephone

Personal (Give name, address, phone and length of time known)

Name Company Time Known

Address Telephone

Name Company Time Known

Address Telephone

FINANCIAL INFORMATION

(This is for our information only and will be kept confidential.)

Tuition Semester Trimester \$ _____

Estimated Additional Expenses (Books, Fees, Etc.) \$ _____

Room and Board Expenses Yes No
If yes, give details (costs per month/semester, etc.) \$ _____

Have you applied for other financial assistance for the upcoming Academic Year? \$ _____

Yes No
If yes, give details

Are you now, or will you be receiving any other scholarship/financial aid for the upcoming academic year? \$ _____

Yes No
If yes, give details

What percentage of college costs are paid by family _____% \$ _____

Do you have current employment that you intend to keep during the upcoming academic year?

Yes No

List estimated income per semester/trimester \$ _____

Will you have a percentage of costs reimbursed from the company where you are presently employed?

Yes No
If yes, give details

Indicate benefits and monthly amounts you may be receiving

Veterans Social Security Neither \$ _____
(Estimated amounts are acceptable where costs are not known at present.)

Use this space for any additional information you feel is pertinent.

EMPLOYMENT INFORMATION

Give particulars of all present and past employment relating to the requirements of this scholarship, starting with your most recent employment.

This is for our information only, and employers will not be contacted without your permission.

Employer _____

Address _____

_____ Telephone (add area code) _____

Supervisor _____

Job Title/Work performed _____

Dates Employed: From _____ To _____

Employer _____

Address _____

_____ Telephone (add area code) _____

Supervisor _____

Job Title/Work performed _____

Dates Employed: From _____ To _____

COMPREHENSIVE EDUCATIONAL OBJECTIVE

Submit a typed 250-word comprehensive educational objective. Include what occupation you want to prepare for by attending college, and the reasons you have decided on the field of water technology. Use space provided below.