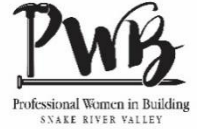


The SRVBCA Professional Women in Building support those looking to enter the building industry by awarding Scholarships in the amount of \$1,000 to deserving students pursuing a career in the construction trades in Idaho.



**TO BE CONSIDERED FOR THIS SCHOLARSHIP, THE FOLLOWING IS REQUIRED:**

- 1. Submit the completed and signed application.
2. You must be pursuing a career in a building related field during the 2024/25 academic year at a school in Idaho.

Contact Information

Full Name: Application Date:
Mailing Address:
City: State: Zip:
Phone: Email:

Education

Name of Current High School/ College/ Vocational/ or Technical School:
Address: City: State: Zip:
Academic Major: Current GPA: Expected Graduation Date:
Name of School Attending for 2024/25 Academic Year:
City: State: Year in School:
Expected Degree: Expected Graduation Date:
Additional Post-Secondary Education (if applicable) University, College, Vocational or Technical Schools attended:
1. Institution Name: City: State:
Enrollment Dates: From To Course of Study:
Degree/Certificate Earned (if any): Ending GPA:
2. Institution Name: City: State:
Enrollment Dates: From To Course of Study:
Degree/Certificate Earned (if any): Ending GPA:

Extra-Curricular/Community Service/Activities (Please attach a separate sheet of paper if needed)

In the section below, enter the name(s) of the activity(s) in which you have participated. Please detail the time commitment you expended on each activity. When applicable, indicate whether you received a varsity letter or served in a leadership position.

- 1. Organization/Activity: City: State:
Time Commitment: From To Average Hours Participated In Per Week:
Participation:
2. Organization/Activity: City: State:
Time Commitment: From To Average Hours Participated In Per Week:
Participation:

Educational Goals (Please use a separate sheet and include answers to questions)

What educational studies do you plan to pursue or are you currently pursuing?
Why are you applying for this scholarship?
How will this scholarship help you attain your goal?
Describe any other financial aid or scholarships you will receive.

References:

- 1. Name: Phone: Email:
Length of Time Known: Relationship:
2. Name: Phone: Email:
Length of Time Known: Relationship:

I attest that the information contained in this application is true and accurate. I agree that this application and supporting documents may be used for the purpose of evaluation and selection for the scholarship. I agree to provide my social security number and birth date to SRVBCA if I am chosen to receive this scholarship. I give permission for SRVBCA and PWB to use my name and photo in future scholarship advertising if I am selected to receive this scholarship.

Signature: Printed Name: