



SCMA Paul LaVene Architecture Scholarship Program

(For full-time students having completed their second year of undergraduate study or higher)

APPLICATION DATA

Last Name _____ First Name _____ Middle Initial _____

Permanent Home Mailing Address _____ Apartment # _____

City _____ State _____ Zip Code _____

Telephone _____ Email _____

Name of contact person at this address _____ Relationship _____

Campus Address _____ Apartment # _____

City _____ State _____ Zip Code _____

Telephone _____

Date of Birth: Month _____ Day _____ Year _____

Are you a citizen of US or Canada Yes _____ No _____

UNDERGRADUATE SCHOOL DATA

Refer to the guidelines for eligible schools and majors

Name of most recent undergraduate school attended. Use official school name. Do not use abbreviations.

_____ City _____ State _____

Years attended _____ Grade Point Average (based on 4.0 max) _____

Major or course of study _____ (Expected) graduation date: Month _____ Year _____

MASTERS STUDY SCHOOL DATA (if applicable)

Refer to the guidelines for eligible schools and majors

Name of school attended for Masters study. Use official school name. Do not use abbreviations.

_____ City _____ State _____

Years attended _____ Grade Point Average (based on 4.0 max) _____

Major or course of study _____ (Expected) graduation date: Month _____ Year _____

DOCTORATE STUDY SCHOOL DATA (if applicable)

Refer to the guidelines for eligible schools and majors

Name of school attended for Doctorate study. Use official school name. Do not use abbreviations.

_____ City _____ State _____

Years attended _____ Grade Point Average (based on 4.0 max) _____

Major or course of study _____ (Expected) graduation date: Month _____ Year _____

Sending a resume does not replace any part of this application. If space provided in any section is inadequate, you may continue on additional sheets. Attachments must follow the same format. DO NOT repeat information already reported on the application form. Your name, address, and name of this scholarship program should be included on all attachments.

WORK EXPERIENCE

Describe your work experience during the past four years (e.g., food server, babysitting, lawn mowing, office work). Indicate dates of employment for each job and approximate number of hours worked each week. List amounts earned at each job.

Employer/Position	From-Mo/Yr.	To-Mo/Yr.	Hours per Week

ACTIVITIES, AWARDS, AND HONORS

List all school activities in which you have participated during the past four years (e.g., student government, music, sports, etc.). List all community activities in which you have participated without pay during the past four years (e.g., Boy/Girl Scouts, hospital volunteer, Special Olympics). Note all special awards, honors, and offices held. Indicate whether high school or college activities.

Activity	No. of Years Partic.	Special Award, Honors	Offices Held	Activity	No. of Years Partic.	Special Award, Honors	Offices Held

GOALS AND ASPIRATIONS

Make a brief statement or summary of your plans as they relate to your educational and career objectives and long-term goals. Include how it involves concrete masonry.

OTHER AWARDS

Please list the name and annual amount of any grants or scholarships you have been awarded for the coming school year only

Name of Award	School to which award will be applied	Amount	Check one	
		\$	<input type="checkbox"/> Granted	<input type="checkbox"/> Pending
		\$	<input type="checkbox"/> Granted	<input type="checkbox"/> Pending
		\$	<input type="checkbox"/> Granted	<input type="checkbox"/> Pending
		\$	<input type="checkbox"/> Granted	<input type="checkbox"/> Pending

**APPLICANT APPRAISAL
(REQUIRED)**

To the Applicant: This section is required and must be completed in the format provided or equivalent separate letter provided. If incomplete, your application will not be evaluated. The section is to be completed by a college counselor or advisor, an instructor, or a design related work supervisor who knows you well.

To the Adult Appraiser: You have been asked to provide information in support of this application. When complete, please return to applicant. If you prefer, photocopy this section and return to applicant in a sealed envelope or submit separate letter with designated information.

Comments: _____

Appraiser's Name _____ Title _____ Telephone _____

Signature _____ Organization _____ Date _____

**TRANSCRIPT
INFORMATION**

Applicants **must** include with this application, all college transcripts of grades from each school attended. Grade reports are not acceptable. Online transcripts must display student name, school name, grade and credit hours earned for each course, and term in which each course was taken. Unofficial transcripts are acceptable but must be verified by official transcripts if requested.

APPLICATION CHECKLIST

The student is responsible for submitting all materials to the Southeast Concrete Masonry Association on time. Incomplete applications will not be evaluated. This application becomes complete and valid only when all of the following materials have been received.

 Student Application with completed Applicant Appraisal Current Complete Transcript(s) of Grades

(include grading score)

All materials, including transcript, must be addressed to:

SCMA Paul LaVene Architecture Scholarship Program
c/o James Cain, President
179 Green Meadows Dr.
Forest City, North Carolina 28043

CERTIFICATION

The Southeast Concrete Masonry Association has the sole responsibility for selecting recipients based on criteria as set forth in the program's description. This application becomes the property of the Southeast Concrete Masonry Association. (It is recommended you keep a copy for your files).

I acknowledge decisions are final. I certify I meet eligibility requirements of the program as described in the guidelines and the information provided is complete and accurate to the best of my knowledge. If requested, I will provide proof of information, including an official transcript of grades and a copy of my U.S. Income Tax Return. Falsification of information may result in termination of any award granted.

Applicant's Signature _____ Date _____