



ASA ASCETTES AUTOMOTIVE SCHOLARSHIP APPLICATION

Through one or more annual projects, the ASA Ascettes hereby establish scholarship funds to assist students who are entering, continuing, or completing their education above high school level. One will be awarded in the automotive field and one in general education.

Applicants must belong to the immediate family of Automotive Service Association Northwest (in good standing) and/or their employees and their immediate families. A selection criterion includes financial needs, demonstrated desire to further their education, and academic aptitude.

***Applicants for the automotive scholarship must plan to pursue a job in the automotive industry.*

Applicants may not apply if they were awarded the Ascettes Scholarship in the previous year.

In addition to completing the attached application, applicants must submit one letter of recommendation completed by a recent faculty member, or recent employer if out of high school more than 2 years, and an academic transcript. Applications must be submitted by an ASA member in good standing.

The completed application, letter of recommendation and transcript must be received at the ASA Regional Office, **NO later than April 10th of each year**. Applicants will be notified in May of award.

This scholarship will be considered and awarded (subject to available funds) by the current Ascettes board of officers each year, or by those designated by the board. Check will be made out to recipient and school of choice.

This scholarship is originally established in memory of ANN ABRAHAMSE, EVELYN SCHREINER and ERLA SMITH. It is to be continued in the memory of all ASA Ascettes.

Email Completed application to:
ascettes@gmail.com

Mail completed application to:
Ascettes Scholarship Chairman
ASA Ascettes
7403 Lakewood Dr. West #7
Lakewood, WA 98499

ASA Northwest Ascettes – Automotive Scholarship Application

STUDENT INFORMATION

Legal name in full: _____ Driver License #: _____
Last Name First Name M.I.

Address: _____ Birthdate: _____
Number, Street, and Apartment Number

City State ZIP

Home telephone: _____ Marital Status: _____ # of Dependents: _____

E-mail address: _____

COLLEGE INFORMATION

Name of Educational Facility: _____

Address _____
Number, Street, and Apartment Number

City State ZIP

Counselor's Name _____ Telephone _____

ASA MEMBER SUBMITTING THIS APPLICANT

Shop Name: _____

Address _____
Number, Street, and Apartment Number

City State ZIP

Contact Person: _____ Telephone _____

EDUCATION HISTORY

Are you currently enrolled in high school? Yes No

High School: _____ City/State: _____

Date(s) Attended: _____

Degree(s)/Certificates Earned _____

List Special Training: _____

High School Cumulative GPA: _____

Counselor's Name: _____ Telephone: _____

MILITARY HISTORY

Are you or have you enrolled in a branch of the United States Military: Yes No

If yes, what branch: _____ Are you enrolled in ROTC? Yes No

STUDY PLANS

What is your educational goal? _____

Length of time /number of educational units for completion of above: _____

If currently attending college:

Number of college credits earned to date _____ Total number of credits required for graduation _____

Expected date to receive degree/graduate _____ Degree you will receive _____

CAREER PLANS

What are your plans after graduation? *Be as specific as possible*

AUTOMOTIVE RELATED ACTIVITIES

Please describe any involvements in the automotive industry or special automotive orientated programs you have participated in.

Examples: VICA, Ford/AAA Skills Competition, etc.

Describe your technical education or technical projects:

Describe any specialized tools you have used.

Examples: Robotics, metal shop, computer programming, or automotive related

SCHOOL ACTIVITIES

Please describe any school activities, clubs, or projects you have been involved with in the past three years. Be sure to indicate the number of hours involved and if you have served in any leadership roles.

Examples: student government, sports, publications, school sponsored community service programs, student-faculty committees, art programs, music programs, etc.

Please list any awards, publications, or special recognition/awards you have received (between 9-12th grade):

COMMUNITY SERVICE ACTIVITIES

Describe any school, church, charity, volunteer or occupational activities. Please list number of hours involved for each community service.

Examples: mission trips, boy/girl scouts, military service, etc.

CURRENT EMPLOYMENT INFORMATION

Current employer: _____

Supervisor's Name: _____ Telephone _____

Job Duties/type of work: _____

Employment Dates: _____ Avg Hrs per week: _____ Salary per Hour: _____

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FINANCIAL INFORMATION

How much will it cost to complete your education? _____

How much of your school costs will be paid by others? _____

Will you spend this scholarship money on tuition or books? _____

Are you (choose one):

Self-Supporting with Dependents: Responsible for your own housing, food, transportation in addition to supporting dependent(s) in your household.

Self-Supporting: Responsible for your own housing, food, transportation, insurance, etc. without any assistance from others.

Partial Support: Not responsible for housing/living costs, but responsible for transportation, insurance, etc.

Full Support: Not responsible for any housing/living costs and have full financial support from others (parents, guardians, etc).

Have you received other scholarships? Please explain: _____

Do you plan to work while attending school? Full Time Part Time Not at All

Do you qualify for College Bound? Yes No

Please attach a separate essay (minimum of 5 paragraphs) telling us about yourself and any other information that would be helpful in evaluating your application for this scholarship.

REFERENCES

Name: _____ Phone: _____

Name: _____ Phone: _____

I certify that all of the information and materials provided in and with this application to the best of my knowledge are true and accurate. I further agree that if I am selected for this scholarship, I will supply the information to the scholarship donor on my progress.

Applicant Signature: _____

Date: _____

Please Find Enclosed:

Letter of Recommendation

Transcript

I have requested the following be mailed direct:

Letter of Recommendation

Transcript

DUE DATE: Application must be received in ASA NW offices no later than April 10th of each year

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ascettes@gmail.com

Mail completed application to:
Ascettes Scholarship Chairman
ASA Ascettes
7403 Lakewood Dr. West #7
Lakewood, WA 98499