



2018 ANNUAL SCHOLARSHIP PROGRAM

The American Public Works Association (APWA) Chicago Metro Chapter is excited to offer scholarships toward: 1) continuing education or training for employees of public works agencies, and 2) courses for students in an associate, bachelors, or graduate degree program related to a public works career field.

PURPOSE of AWARD

APWA develops and supports the people, agencies, and organizations that plan, build, maintain, and improve our communities. As a comprehensive public works resource, APWA continues in its rich tradition of making a difference both on an individual and professional level. APWA is a not-for-profit, 501(c)(3) organization that prides itself on its ability to provide varied educational and networking opportunities that help public works personnel to grow in their professionalism and directly impact the quality of life in all the communities they serve.

To help fulfill this Mission, the Chicago Metro Chapter annually sponsors this scholarship program.

ELIGIBILITY:

Candidates will apply in one category, for which eligibility is defined as follows:

- Category 1: **Financial reimbursement for an employee of a public works agency toward continuing education or training in a non-degree program, class or certification** in 2019 to enhance skills or obtain new skills and knowledge to succeed in the public works field. Job skills training, a credentialing program, a certification such as IEPA operators, ASE, EVT, ENVISION and LEED, or continuing education to keep up-to-date are strongly encouraged. Personnel at all levels of an agency are eligible.

The application must include as much information as is known about a desired program including a general description and objective(s). Recipients of a Category 1 scholarship will later be required to submit proof of acceptance into a matching program before the first program meeting date, then successfully complete that program before submitting for reimbursement.

APWA-sponsored programs and events like PWX, Snow Conference, Chapter Expo, Illinois Roads Scholar, and Illinois Public Service Institute (IPSI), are not eligible.

- Category 2: **Part-time or full-time pursuit of an associate, bachelors, or graduate degree** in the fields of Civil, Environmental or Construction Engineering, Public Administration, Public Works Management, or other programs directly related to or enhancing a career in the public works field. Applicants must prove acceptance or enrollment in an accredited college, university, or community college for the Spring or Summer 2019 semester. Applicants can be employees of a public works agency.

All applicants must reside or be employed within the geographic limits of the Chapter (Illinois counties of Cook, Lake, McHenry, DuPage, DeKalb, Grundy, Kane, Kankakee, Kendall and Will). Chapter officers, Chapter Scholarship Committee members, or family members of the same, are ineligible.

Previous applicants or award recipients may re-apply this year by submitting a new application.

FINANCIAL ASSISTANCE:

Candidates who receive monies from other sources, such as grants or scholarships, are still eligible to apply for this program. Financial need is only one of the many criteria used in judging award recipients.



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DEADLINE:

Application materials must be postmarked, e-mailed, or faxed on or before **Monday, October 22, 2018**, to the Scholarship Committee Co-Chairperson.

SUBMITTALS:

A complete scholarship application to be considered for review includes the following:

- 1.) Return only those pages that are applicable to your Category, along with any attachments.
- 2.) Sign and date application. Electronic signatures for submittals by e-mail are acceptable.
- 3.) Reference letters may be attached or sent directly to the Scholarship Committee Co-Chairperson, and must be received by the deadline date.

This application can be downloaded from <http://chicago.apwa.net>, and click “Awards”.

AWARD AND DISBURSEMENT:

It is the intent of the Chapter to award multiple scholarships in each category. An award amount may consider fees and tuition for the educational program, as well as books, supplies and equipment required for the program. Recipients will be notified of their awards by the last week of November.

All are invited to the APWA Chicago Metro Chapter Holiday Luncheon on Thursday, December 13th, 2018. Attendance by an award recipient is strongly encouraged so that the Scholarship Committee and other APWA members may get to know and network with you.

Award monies for Category 1 (continuing education) are disbursed to the recipient as reimbursement upon proof of successfully completing a program that matches the objectives or description provided in the application. Award monies for Category 2 recipients will be in the form of a check issued by the Chicago Metro Chapter of the American Public Works Association and made payable to the applicable institution with reference to the award recipient.

The Chapter reserves the right to deny awarding any scholarships if applications are judged as failing to meet the mission of APWA and this scholarship program.

Applications must be signed, then postmarked, e-mailed or faxed **on or before the deadline**, to:

APWA Chicago Metro Scholarship
c/o David Preissig, Scholarship Committee Co-Chair
Village of Burr Ridge
451 Commerce Street
Burr Ridge, IL 60527
Ph: (630) 323-4733 x.6000 Fax: (630) 323-4798
Email: dpreissig@burr-ridge.gov

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GENERAL INFORMATION FORM

APPLICATION TYPE BY CATEGORY (CHECK ONLY ONE)
<input type="checkbox"/> Category 1: Employee of a Public Works agency seeking continuing education in a non-degree program, class or certification in 2019. I have provided a thorough description of the desired program in this application. I understand that events or seminars sponsored by APWA are ineligible.
<input type="checkbox"/> Category 2: A student pursuing an associate, bachelors, or graduate degree in a program closely related to the public works field with the objective of enhancing my career in a public works field. (Note: Employees of a public works agency are also eligible for this category).
Title of the educational program for which you will enroll and as referenced throughout this application:

APPLICANT INFORMATION	
NAME	
HOME STREET ADDRESS	MAILING STREET ADDRESS (if different)
CITY	CITY
STATE, ZIP CODE	STATE, ZIP CODE
<i>Note: residence or employment within the geographic boundaries of the APWA Chicago Metro Chapter is required for eligibility.</i>	
HOME PHONE	ALT. PHONE
EMAIL	
APWA CHICAGO METRO BRANCH AFFILIATION (if any)	
APWA MEMBER SINCE	

EMPLOYMENT HISTORY (Current / relevant experience below. May attach a resume or a separate page.)
INTERNSHIP <input type="checkbox"/> PART TIME <input type="checkbox"/> FULL TIME <input type="checkbox"/> NOT CURRENTLY EMPLOYED <input type="checkbox"/>
TOTAL YEARS OF EMPLOYMENT IN THE PUBLIC WORKS FIELD?
EMPLOYER
ADDRESS
CITY, STATE, ZIP
PHONE
POSITION/WORK DESCRIPTION
SUPERVISOR: _____ SUPERVISOR TITLE: _____

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GENERAL INFORMATION FORM (Continued)

EDUCATION AND CERTIFICATIONS (Use expected graduation date if not yet completed.)		
Provide for each below, the School Name, City, State and degree obtained or anticipated.		
HIGH SCHOOL or G.E.D. PROGRAM		GRADUATED (mo/yr)
TECHNICAL SCHOOL		GRADUATED (mo/yr)
TECHNICAL SCHOOL SPECIALIZATION		
COLLEGE OR UNIVERSITY		
CURRENT YEAR/LEVEL IN SCHOOL/COLLEGE/UNIVERSITY		
PROGRAM NAME/SPECIALIZATION		
DEGREE (Major/Minor)	G.P.A.	GRADUATED (mo/yr)
GRADUATE SCHOOL(S)		
PROGRAM NAME/SPECIALIZATION		
DEGREE (Major/Minor)	G.P.A.	GRADUATED (mo/yr)
CERTIFICATIONS		
EDUCATION CONTACT (Instructor/Counselor/Teacher/Professor)		TITLE:
		PHONE:
<p>Category 2 applicants: please provide a copy of your transcript for the previous <u>two</u> semesters. College Freshmen may include their high school transcript if that is the most recent.</p>		

REFERENCE INFORMATION	
REFERENCE NAME	
EMPLOYER	
ADDRESS	
DAYTIME PHONE	EVENING PHONE
<p>Applicants must list a person who may be an instructor, academic counselor, public works professional, or person other than a family member, who is knowledgeable of the applicant's interest/experience in the public works field.</p> <p>A separate letter of recommendation is required from this person. Attach reference letter(s) to the application or have them emailed/mailed separately to the Scholarship Committee Co-Chairperson by the deadline date.</p>	

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GENERAL INFORMATION FORM (Continued)

PROGRAM PROPOSED FOR SCHOLARSHIP ASSISTANCE (Attach additional pages if necessary)

Category 1 Applicants: Submit a description of the class or certification program you will be seeking in calendar year 2019. Include general objectives to be obtained upon completion of the program and explain the benefits that such a program would provide you and your employer agency.

Category 2 Applicants: List the course(s) for which you are requesting scholarship assistance for Spring or Summer 2019. Also list the courses you are presently taking along with a brief description of each.

FINANCIAL ASSISTANCE

Include anticipated cost of educational program for which you will enroll. APWA will provide scholarships toward tuition, as well as books, fees, supplies and equipment if required of all students in the course(s). Please note if the items are for the Spring 2019 semester, Summer 2019 or both. Also provide details of any financial programs from which you did or will receive monies.

Anticipated Total Course Charges (including tuition, books, and fees): \$

Other Total Monies to be Received (be specific by source, e.g. grants, scholarships, etc.):

Source: **Funds \$**

Source: **Funds \$**

Source: **Funds \$**

Other information

Is this course eligible for reimbursement by your employer? Yes No

If eligible, estimate the dollar amount and/or percentage:

EXTRACURRICULAR ACTIVITIES

Describe involvement in extracurricular, community, or volunteer activities. Attach additional pages, if necessary.

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GENERAL INFORMATION FORM (Continued)

GOALS IN MY EDUCATION AND CAREER (Answers may be provided in an essay format and attached on separate, formatted pages, if preferred).

Describe your field of study or degree program and include any minor(s).

Describe the type of employment you expect to find in the public works field commensurate with your educational background. If you are currently employed by a public works agency, describe why you have selected that career. In either case, describe the challenges you expect to face in this career.

Describe a problem you've solved or a problem you'd like to solve—anything that is of personal or professional importance, no matter the scale. Explain its significance to you and what steps you took or could be taken to identify a solution.

Discuss an accomplishment, event, or realization that sparked a period of personal growth and a new understanding of yourself or others.

Expand upon any other information about yourself that is meaningful and should be noted for consideration, which may include background, identity, interests, talents, work experience, career goals, educational aspirations, research, or financial challenges.

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SIGNATURE _____	DATE
First and Last Name	
<p>I certify that all the information submitted to be true and correct. I hereby authorize the Scholarship Committee (Committee) of the Chicago Metro Chapter of the American Public Works Association (APWA) to verify information and statements in my application and submissions. I understand judgments of the Committee are final, and I will abide by them without recourse or action against the Committee or any and all members of APWA.</p> <p>I further certify that neither I nor any member of my immediate family is an officer, director or member of a Scholarship Committee of the APWA, Chicago Metro Chapter, and/or one of the Branches.</p> <p>Please ensure that prior to submittal the application is digitally signed above. Applications must be signed in order to be considered. I understand that checking this box constitute a legal signature confirming that I acknowledge and agree to the above Terms of Acceptance.</p>	

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EMPLOYER STATEMENT

(Please complete this section if currently employed by a public works agency)

APPLICANT'S NAME:	
EMPLOYER	
EMPLOYER ADDRESS	
DEPARTMENT OF APPLICANT	
LENGTH OF EMPLOYMENT OF APPLICANT	
DIRECT SUPERVISOR'S NAME	
SUPERVISOR'S POSITION	
SUPERVISOR'S PHONE	EMAIL
Are you or your organization a member of the APWA Chicago Metro Chapter? YES <input type="checkbox"/> NO <input type="checkbox"/>	
Describe how the requested course(s) or seminar(s) will benefit both the employee and your agency.	
Is the employee eligible for tuition reimbursement for the program described herein through an employer-sponsored program? YES <input type="checkbox"/> NO <input type="checkbox"/>	
If eligible, what portion of the cost will be reimbursed?	

EMPLOYER INFORMATION COMPLETED BY:	
SIGNATURE	DATE
TITLE:	