



**SCHOLARSHIP FUND
APPLICATION**

Application Deadline: Thursday, July 2nd, 2021

Mail or Deliver Application to:

Phillip Crunk-Vice President
C/O Chief Building Official
Shelby County, AL
1123 County Services Dr.
Pelham, AL 35124

(Fax or e-mail applications will not be accepted.)

Action of the Education Committee	
Application	
_____ Approved	_____ Denied
This Scholarship is awarded for Fiscal Year October 1 – September 30	
By: _____	Date: _____

NOTICE TO APPLICANT: Please read thoroughly the “Instructions to Applicant” and the “Criteria of Qualifications” Sections of this application.

COAA SCHOLARSHIP FUND APPLICATION

Date:..... _____

STUDENT INFORMATION

Name of Student (first/middle or maiden/last): _____

Home Address (street / city / state / zip):..... _____

Phone:..... _____

Date of Birth:..... _____

Social Security Number:..... _____

Marital Status:..... _____

If married, Give Spouse's Full Name:..... _____

Applicant's Present Occupation:..... _____

**I hereby apply for a grant to enable me to
Obtain/continue my education at:**..... _____

Located At:..... _____

For The Session Beginning (give month and year): _____

**My Class Standing Will Be
Freshman, Sophomore, Junior, Senior:**..... _____

My intended vocation is:..... _____

The Course of Study I Plan to Major In Is:..... _____

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STUDENT INFORMATION

Names of high school, preparatory school, college, etc. you have attended or in which you are now enrolled:

School:.....
Location:.....
Dates (from / to):.....

School:.....
Location:.....
Dates (from / to):.....

School:.....
Location:.....
Dates (from / to):.....

Honors Received:.....
Professional Societies:.....
Clubs or Fraternities:.....
Extracurricular Activities:.....
Hobbies:.....

Indicate by title and amount any other
Financial assistance you will be
receiving:.....

If you have any additional information or a statement which you feel will assist the
committee in reaching a favorable decision on this application, please so state. (Use
additional pages if necessary.):

Provide evidence or acceptance by, or attendance at, an accredited junior or senior
college or university. Provide a copy of high school / college transcript and ACT/SAT
test score.

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COAA MEMBER INFORMATION

Name of COAA member that recommended this scholarship to you(first / middle or maiden / last):

Relation to Student:.....

Home Address (Street / City / State / Zip):.....

Name of Employer:.....

Title of Position or Job:.....

PARENT INFORMATION

Name of **father** (or male guardian):.....

Home Address (Street / City / State / Zip):.....

Name of Employer:.....

Title of Position or Job:.....

Name of **mother** (or female guardian):.....

Home Address (Street / City / State / Zip):.....

Name of Employer:.....

Title of Position or Job:.....

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INSTRUCTIONS TO APPLICANT:

1. This application has been prepared as a frank and friendly means of obtaining necessary information regarding the applicant and the applicant is required to give all information requested. Read the contents carefully and understand each question and all information requested.
2. Before filling in the application, draft your answers on an extra application form as your file copy and work sheet. No consideration will be given to carelessly prepared or incomplete applications.
3. Every question and statement must be answered and submitted. **Do not answer any question with a check mark. If the answer is "none" or "not applicable", it should be so stated. If spaces are inadequate for some answers, use a separate sheet.**
4. Answers must be legible.
5. Mail or hand deliver directly to the address indicated on sheet 1 of the application, to be received no later than the April 1, 2018 deadline. Please include the following:
 - a) This application fully completed and signed.
 - b) An up-to-date copy of your high school or college transcript of academic record.
 - c) ACT or SAT scores, for incoming freshmen only.
 - d) Evidence of acceptance by, or attendance at, an accredited junior or senior college or university.

"CRITERIA OF QUALIFICATION" OF STUDENT APPLICANTS:

The Scholarship Committee may establish reasonable and operable procedures and qualifications for determining the selection of the student considered as the recipient of the grant from the Scholarship Fund, provided not in conflict with criteria or guidelines herein stated, and as follows:

1. Code Officials Association of Alabama is a not for profit organization. This scholarship is open to any person that applies.
2. The applicant's grade average must be "C" or better.
3. The Applicant should possess qualities of good character and integrity.
4. A record of evidence of satisfactory scholastic or school grades, ability, ambition and desire for continuance of education shall be submitted.
5. The funds granted may be utilized by a student for continuation to succeeding year or years upon satisfactory academic progress, subject to review by the Committee. The maximum number of years that funds may be granted a student is four years. All students desiring continuation of funding must make application each year, using this form (as updated annually).

I solemnly affirm to the correctness of the information supplied in this Application and that I have thoroughly read and understand the "Instructions to Applicants" and the "Criteria of Qualification" as transmitted herewith. If the grant is provided, I agree and promise to use it for no other purpose than as set forth in the "Criteria of Qualification".

APPLICANT'S SIGNATURE: _____

DATE: _____