NORTHEAST CHAPTER SALT LAKE INTERNATIONAL AIRPORT: THE HUB WINTER OPERATIONS & DEICING CONFERENCE SCHOLARSHIP PROGRAM

Completed application must be submitted to The Hub Winter Operations Conference Scholarship Program Scholarship Managers PO Box 2810 Cherry Hill, NJ 08034.

- 1. Please print or type all information.
- 2. School, community and work experience relate only to the last 4 years.
- 3. Obtain a transcript (official or unofficial) or a copy of your grades.
- 4. Transcripts may be in a sealed and separate envelope but they must be sent with the application.
- 5. All data submitted in support of this application becomes the property of Scholarship Managers (SM).
- 6. Two \$1,000 scholarships will be awarded:

APPLICANTS MUST BE A DEPENDENT OF AN EMPLOYEE OF SALT LAKE CITY INTERNATIONAL AIRPORT

APPLICANT INFORMATION

FULL NAME			
ADDRESS (HOME ADDRESS NOT A CAMPUS OR SCHOOL ADDRESS)	CITY	STATE	ZIP
PHONE #	EMAIL ADDRESS		
A.A.E. or Executive Candidate? 🗖 Yes 📮 No			
EMPLOYEE DATA			

FOLL NAME			
ADDRESS	CITY	STATE	ZIP
PHONE #	EMAIL ADDRESS		

NEC-AAAE ID NUMBER (LEAVE BLANK IF NON-MEMBER)

HIGH SCHOOL DATA All applicants should fill in this section, even college students.

COLLEGE BOARD 6 DIGIT CODE (THIS MAY BE LEFT BLANK IF IT CANNOT BE OBTAINED AT THE GUIDANCE OFFICE)				
HIGH SCHOOL NAME				
ADDRESS		CITY STATE	ZIP	
GRAD DATE MONTH (MM)	YEAR (YYYY)	NON-WEIGHTED CUMULATIVE GPA (ON A 4.0 BASIS) NUMERICAL OR LETTER GRADES MUST BE CONVERTED TO A 4.0 BASIS		

COLLEGE DATA

I attend, or have applied, to the following school(s)

NAME CITY/STATE
PROPOSED MAJOR PROPOSED GRADUATION DATE MONTH (MM) YEAR (YYYY)

CUMULATIVE GPA (ON A 4.0 BASIS) NUMERICAL OR LETTER GRADES MUST BE CONVERTED TO A 4.0 BASIS



COMMUNITY SERVICE, EXTRA-CURRICULAR AND CO-CURRICULAR ACTIVITIES DATA:

Please include information that relates to activities occurring during your **last 4 years of school** – this can be high school, college, or a combination of both. The first line under each heading is filled in as an example.

If additional space is needed please copy this page – resumes or other formats will not be accepted.

	CDADE			
ACTIVITY/ORGANIZATION	GRADE	HRS/WK	OFFICE HELD	HONORS/AWARDS
ACTIVITY/ORGANIZATION	GRADE	HRS/WK	OFFICE HELD	HONORS/AWARDS
ACTIVITY/ORGANIZATION	GRADE	HRS/WK	OFFICE HELD	HONORS/AWARDS
ACTIVITY/ORGANIZATION	GRADE	HRS/WK	OFFICE HELD	HONORS/AWARDS
ACTIVITY/ORGANIZATION	GRADE	HRS/WK	OFFICE HELD	HONORS/AWARDS

Work Experience, Full or Part-Time during the last 4 years only.

EMPLOYER	POSITION HELD	FROM: MONTH/YEAR	TO: MONTH/YEAR	HOURS WORKED PER WEEK
EMPLOYER	POSITION HELD	FROM: MONTH/YEAR	TO: MONTH/YEAR	HOURS WORKED PER WEEK
EMPLOYER	POSITION HELD	FROM: MONTH/YEAR	TO: MONTH/YEAR	HOURS WORKED PER WEEK
EMPLOYER	POSITION HELD	FROM: MONTH/YEAR	TO: MONTH/YEAR	HOURS WORKED PER WEEK
EMPLOYER	POSITION HELD	FROM: MONTH/YEAR	TO: MONTH/YEAR	HOURS WORKED PER WEEK

TRANSCRIPT

All applicants must also submit a transcript or a copy of their grades (unofficial transcripts are acceptable). The transcripts may be in sealed and separate envelopes but they MUST BE SUBMITTED WITH THIS APPLICATION.

ESSAY

Please write an essay that addresses the following question: "What are my educational goals and how do they relate to my career goals". The essay must be 500 words or less, typewritten or computer-generated, double spaced, no longer than 2 pages and stapled to this application. Please place your name in the upper right-hand corner of each page of the essay.

AFFIDAVIT

The signatures below affirm that all the information provided in this application, and supporting documents, is true and complete to the best of our knowledge. If requested, we will provide proof. Failure to provide this proof shall invalidate this application and may result in termination of any aid granted.

SIGNATURE OF APPLICANT

DATE SIGNATURE OF SLC AIRPORT EMPLOYEE

DATE

This application, your essay, and a transcript or copy of your grades must be returned to:

The Hub Winter Operations Conference Scholarship Program Scholarship Managers PO Box 2810 Cherry Hill, NJ 08034

POSTMARKED NO LATER THAN JUNE 29, 2018

The form and format of this application is protected by copyright. It is the sole possession of Scholarship Managers, a division of Career Opportunities Through Education, Inc. Please direct questions to the address shown above or call SM at: (856) 616-9311 or E-mail: scholarshipmanagers@scholarshipmanagers.com