Pittsburgh Maritime Association 2023 Scholarship Program Application Criteria

1. OBJECTIVE

To provide financial assistance to high school seniors whose intention is to pursue a post high school education.

2. <u>ELIGIBILITY</u>

To be eligible, the applicant **must** be a high school senior (or equivalent) and:

Have a Parent or Guardian whose **company** is a member (in good standing) of the Waterways Association of Pittsburgh.

3. <u>TYPE OF SCHOOL</u>

Any formally recognized public, private, or trade institution.

4. <u>APPLICATION PACKAGE</u>

Information necessary to apply is available on the Waterways Association of Pittsburgh website (<u>www.wapgh.org</u>) or by contacting Carole Ann Krelow at (724) 991-0136.

Your completed application package must include:

- a) Application
- b) Personal essay
- c) Parent/guardian statement
- d) Two (2) letters of reference
- e) A copy of high school transcript (including class ranking)
- f) A copy of SAT and/or ACT scores (if applicable)

5. <u>APPLICATION DEADLINE</u>

Applications are to be postmarked no later than *March 31, 2023.* Mail to: Pittsburgh Maritime Association

P.O. Box 178 Valencia. PA 16059

<u>SELECTION PROCESS</u> Applications will be reviewed by a minimum of three (3) members of the Pittsburgh Maritime Association.

7. <u>EQUAL OPPORTUNITY</u> Applicants will be judged without regard to race, sex, ethnic background, religion or age.

8. <u>SCHOLARSHIP TIME LIMIT</u>

The \$2,000 Scholarship will be paid directly to the student upon successful completion of the first semester/grading term. A copy of the first semester transcript must be mailed to: Pittsburgh Maritime Association, P.O. Box 178, Valencia, PA 16059 before a scholarship check will be mailed. The Scholarship Award must be activated within twelve (12) months following the date of the Award.

9. <u>AWARDS CEREMONY</u>

The Pittsburgh Maritime Association will present Scholarships to the winners at the Waterways Association "Annual Summer Picnic Membership Meeting, Wednesday, July 13, aboard the Gateway Clipper, Princess.

Pittsburgh Maritime Association 2023 Scholarship Application

Please type or print clearly in ink.

PERSONA				
Name	(last)	(first)	(mi	<u> </u>
	、 ,		(111))
Address	(street)	(city)	(state)	(zip)
Home Telep	phone Number		_	
Email				
Parent's Na	ime/s		Phone	·
Address				
	(street)	(city)	(state)	(zip)
(must be me	luded and relations			
ACADEMIC	C DATA			
ACADEMIC High Schoo	C DATA			
ACADEMIC High Schoo Expected gr	DATA			
ACADEMIC High Schoo Expected gr Course of s	DATA			
ACADEMIC High Schoo Expected gr Course of s	DATA	are currently enrolled		

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Awards, scholarships, grants and loans you have	received		
Special interests and hobbies			
EXTRACURRICULAR ACTIVITIES	Length of Involvement		
COMMUNITY / VOLUNTEER ACTIVITIES			
	Length of Involvement		
NON-ACADEMIC WORK EXPERIENCE			
	Dates		

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PERSONAL STATEMENT

Please write or type an essay (and attach to this application) discussing your educational and career goals and the reasons you feel qualified to receive this scholarship award.

Applicant signature & date

PARENTAL STATEMENT

The scholarship committee welcomes a statement from the parent(s) or legal guardian(s) citing reasons for their support of the applicant's educational and career endeavors. Please attach your written statement to this application.

Parent / legal guardian signature & date

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Pittsburgh Maritime Association 2023 Scholarship Application Letter of Reference No. 1

Please type or print clearly in ink.

Name of Applicant

How long and in what capacity have you known the applicant _____

Please print the following information:

Your Name	
Your Address	
Position	_Department
School	
Telephone Number to contact you, if necessa	
Hours available to contact you:	
Email address (optional) to contact you:	

Please provide a short written or typed summary indicating your impression of the applicant's character, personality, intellectual ability, and achievements (*You may attach a separate document as your statement*)

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Pittsburgh Maritime Association 2023 Scholarship Application Letter of Reference No. 2

Please type or print clearly in ink.

Name of Applicant _____

How long and in what capacity have you known the applicant _____

Please print the following information:

Your Name	
Your Address	
Position	Department
School	
Telephone Number to contact you, if necessa	ary: ()
Hours available to contact you:	
Email address (optional) to contact you:	

Please provide a short written or typed summary indicating your impression of the applicant's character, personality, intellectual ability, and achievements (*You may attach a separate document as your statement*)