THE KURT H. AND DONNA M. SCHULER CASH GRANT

“Dear Applicant,

“This grant honors both Kurt H. Schuler, CET (Ret) and Donna M. Schuler. Kurt has been an ASCET member since 1972. He has served as a Chapter President, Regional Vice President, National Secretary-Treasurer, has chaired and served on several National Committees, and served as ASCET General Manager from 1992 to 2005. Donna passed away on March 29, 2009. She became active in ASCET in 1977 when she was the Secretary for the host committee planning the 1978 Annual Meeting. She handled the ASCET Computer/Banking support from the late 1980’s until 2005, served as ASCET General Manager from September 1988 to June 1992, co-chaired several ASCET National committees, and was voted Honorary ASCET Membership in June 1989. The former Small Cash Grant Program was re-designated the Kurt H. Schuler Cash Grant by the Board of Directors at their June 21, 2008 Annual Meeting and re-designated the Kurt H. and Donna M. Schuler Cash Grant by the ASCET Executive Committee in August 2009.

The grant was originally suggested by students and faculty advisors who recommended that a grant be awarded to deserving students and that this award carry as few restrictions as possible. The award shall be in the amount of $400.00 to be used to offset the cost of educational expenses as desired.”

QUALIFICATIONS

1. Be either a student, certified, regular or registered member of ASCET OR,
2. Be a High School senior in the last five months of the academic year who will be enrolled in an Engineering Technology curriculum no later than six (6) months following selection of the award.
3. By achieving passing grades in their present curriculum.

SELECTION AND AWARD

All applications are reviewed by the Financial Aid Committee which also selects the recipients. Recipients will be notified in July and checks will be mailed to the recipients in September. Award checks will be issued directly to the students upon notification and verification that they are enrolled in an Engineering Technology curriculum in an institute of higher learning.

INSTRUCTIONS FOR APPLICATION

1. Complete the APPLICATION FORM which applies to you.
2. Attach at least one (1) LETTER OF RECOMMENDATION from a personal acquaintance, faculty member or employer outlining motivation, progress, outstanding achievements, and an evaluation of your potential in the field of Engineering Technology.
3. Attach a copy of your TRANSCRIPT.
4. Be sure all documents are mail in sufficient time for receipt by the ASCET Office by April 1.
5. NOTE: Failure to complete or include any items in the application package may be grounds for rejection or the application unless the committee, at its discretion, is able to notify you of the incomplete or omitted items and such items are submitted within the evaluation period time schedule.
6. This package should contain:

   E:4.11.02 Application Form A – ASCET Member
   E:4.11.03 Application Form B – High School Senior
   E:4.00.04 Sample Recommendation Letter

NOTE: Only Engineering Technology students qualify for this grant, not those seeking an engineering degree. For ENGINEERING scholarship information we suggest you contact the National Society of Professional Engineers for their scholarship requirements. Please contact: Golden Richardson; Committee Staff Liaison; Scholarship Division, Educational Foundation; NSPE; 1420 King Street, Alexandria, VA 22314-2715; (703/684-2858)
APPLICATION FORM
SCHULER CASH GRANT

A: ASCET MEMBER

Name ___________________________________________________ Telephone (____) ________________________________

Mailing Address ____________________________________________

street                                    city                  state                 zip

What is your membership category? ____________________________

If a student member, list student chapter ___________________________ Faculty Advisor _________________________

What institution do you attend? ____________________________________________

Address ________________________________________________________________________ _______________________

street                                  city                              state                   zip

Are you a full time ☐  or part time ☐  student?

Are you receiving other financial aid? yes ☐  no ☐  If yes, in what amount? $______________

Why are you applying for this grant? ____________________________________________

________________________________________________________________________________________ __________

________________________________________________________________________________________ __________

________________________________________________________________________________________ __________

________________________________________________________________________________________ __________

________________________________________________________________________________________ __________

ATTACH A COPY OF YOUR TRANSCRIPT TO THIS APPLICATION.

I hereby certify that the answers given in this application are true and accurate.

Date ______________  Your signature ____________________________________________

I attest to the applicant’s passing grades.

Date ______________  Signature ________________________________________________

Faculty Advisor/Instructor

Do not write below this line

For committee use only. Date received ______________

Application form       ☐
Recommendation          ☐
Transcript               ☐
APPLICATION FORM
SCHULER CASH GRANT

B. HIGH SCHOOL SENIOR

Name _____________________________________________________  Telephone (___) __________________________

Mailing Address ____________________________________________________________ ______________________
        street                                      city                                  state        zip

What school are you attending? Name ________________________________  Telephone (___) __________________

School Address _______________________________________________________________ ______________________
        street                                        city                      state                zip

What institution of higher learning do you plan to attend? ____________________________________________

Address ________________________________________________________________________ __________________
        street                                        city                        state         zip

What discipline in Engineering Technology do you plan to follow? _________________________________________

Why are you applying for this grant? ________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

_______________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

ATTACH A COPY OF YOUR TRANSCRIPT TO THIS APPLICATION.

I hereby certify that the answers given in this application are true and accurate.

Date ______________  Your signature __________________________________

I attest to the applicant's passing grades.

Date ______________  Signature ______________________________________

Faculty Advisor/Instructor

Do not write below this line

For committee use only. Date received ______________

   Application form   □
   Recommendation    □
   Transcript        □
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(Recommendation by personal acquaintance, faculty member, or employer to include an outline of motivation, progress, outstanding achievements, and your opinion of applicant's potential in the field of Engineering Technology)

I recommend _______________________________ as a recipient of the KURT H. AND DONNA M. SCHULER CASH GRANT.

Applicant’s name.

Name (please print)__________________________________________________ Title_________________________

Address ________________________________________________________________________

__________________________________________________________________________

Phone (___)___________________

Signature__________________________________________________________ Date____________________