



**PARKING
INDUSTRY
INSTITUTE**

A Foundation of the
National Parking
Association

1112 16th Street, NW, Suite 840
Washington, DC 20036
202.296.4336

Scholarship Application

A. General Information

Applicant's Name (Last, First, M.I.) _____
Address _____
City _____ State _____ Zip Code _____
Email Address _____ Phone _____
Social Security Number _____ Date of Birth _____
Place of Birth _____ Marital Status _____ No. Of Dependents _____
Name of NPA Affiliated Member Organization (Employer) _____
Name of NPA Affiliated Person (Employee) _____ Position _____
Applicant's Relationship to Above Named Person

- Self Spouse Son Daughter Other

B. NPA Member Certification

This is to certify that the applicant is:

- A son, daughter or spouse of a full-time employee of a firm that is a member of the National Parking Association. The parent or spouse must have been employed at least three years as of January 1st of the year the applicant is applying for a scholarship.
- A full-time or part-time employee of a firm which is a member of the National Parking Association. The employee must have been employed for at least one year as of January 1st of the year he or she is applying for a scholarship.



_____ Signature of Company Official

_____ Print Name

_____ NPA Member Organization or Company

_____ City _____ State _____ Zip

_____ Telephone

C. Education Information

Name of High School Attended _____

Date of Graduation _____ Class Standing _____

List all Colleges/ Universities attended:

College/ University	Dates of Attendance	Graduation Date
_____	_____	_____
_____	_____	_____
_____	_____	_____

College/ University You Plan to Attend _____

Full Time or Part Time _____ Have You Been Accepted _____

Will You Be A: Freshman Sophomore Junior Senior

Major Field of Study _____ Expected Graduation Date _____

List Extra-Curricular Activities in High School or College _____

How Did You Spend Your Last Two Summers? (Attach a separate sheet if necessary)

D. Employment Information

Are You Currently Employed? Yes No

Do You Plan To Work During The Academic Year? Yes No

If Yes, Do You Plan To Work: Full-Time Part-Time

What Percentage Of Your College Expenses Do You Expect To Earn? _____

Employment History

Company (Include address)	From	To	Position Held

E. Employment Information

The following information must be submitted for the same period that aid is requested.
 (All information must be provided for application to be considered)

Please indicate your anticipated living circumstances during that period that aid is requested:

- Dependent Student- Living at home Living away from home
 Independent Student- Single, Living away from home Single w/ children
 Married Married w/ children

Were you claimed as an income tax exemption by your parents or legal guardians last year?
 Yes NO

Total Annual Earning of your Parents/ Guardian _____

How many other children within the immediate family will be attending college concurrently with the application? _____

Name	Age	College	Graduation Date
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Income (Projected)		Expenses (Projected)	
Income Earned by student	\$ _____	Tuition and Fees	
Financial Support or any money paid on the Student's behalf, from parents or relatives	_____	Books & Supplies	
Income earned by spouse	_____	Housing (Rent or Mortgage w/ utilities)	
Social Security Benefits	_____	Food	
Child Support Received for all Children	_____	Clothing	
Welfare Aid	_____	Recreation and Personal Expenses	
Veterans Benefits	_____	Transportation (Gas, Oil, Public Transportation)	
Workmans Compensation	_____	Medical and Dental (not covered by insurance)	
State Tuition Assistance	_____	Other (Life Insurance, Car Payment, etc.)	
Scholarships/ Grants: (Please list, including any that are pending. All applicants must notify the Parking Industry Institute if other scholarships or grants are awarded while this application is still in process.)	_____	TOTAL EXPENSES	
Loans: (Please list)	_____	\$ _____	
ASSETS	_____		
Cash, Savings, \$ Checking Accounts	_____		
Other Assets	_____		
Total Income & Assets:	_____		

F. Supplemental Information

1. Attach a statement (no more than two pages) which outlines the following:
 - a. Your career interest and goals
 - b. Community, civic or professional organizational affiliations
 - c. Major personal accomplishments
 - d. How a Parking Industry Institute scholarship would be beneficial to you
2. Attach a CERTIFIED copy of the most currently available transcript of grades and credits.
3. If you are not yet enrolled in a college or university, please submit a letter of acceptance, if available, from the college or university you plan to attend.

(All documents become the property of the Scholarship Committee and will not be returned).

G. Applicant Recommendation/ Appraisal Forms

To be considered for scholarship aid, three complete recommendation/appraisal forms are required. Two of these should be from a high school teacher or college instructor who is familiar with your academic work, while the third should be from someone knowledgeable about your extracurricular, athletic or employment activities.

Complete, sign and photocopy the enclosed recommendation/appraisal forms and send them to the individuals from whom you are seeking a recommendation. Request that they complete and return the form to the Parking Industry Institute Scholarship Committee as promptly as possible (notify them of the application deadline). It may be helpful if you provide these individuals with a stamped envelope addressed to the Scholarship Committee.

H. Applicant Certification

The information contained in this application is accurate to the best of my knowledge. I understand that scholarships are awarded at the discretion of the Scholarship Committee, and I give the Committee permission to contact my school, references, and employer for verification of this information. I understand that I may be requested to return the award if I do not complete this course of study.

I further acknowledge that I have read the Parking Industry Institute's Scholarship Guidelines and agree to the terms contained therein.

Signature of Applicant

Date

**Signature of Parent/ Guardian
(If applicant is under 18)**

Date

PARKING INDUSTRY SCHOLARSHIP APPLICATION CHECKLIST

Please complete the following checklist before mailing your application to the Trustees of the Parking Industry Institute. Doing so will ensure that your application is complete.

- [] All four pages of the application have been completed, including verification of employment made and signed by a company official on the front page of the application.
- [] Enclose statement outlining personal goals, accomplishments, participation in community organizations, and how an Institute scholarship would help you.
- [] Enclose transcript of grades (generated and certified by the registrar's office of your current school). Please note that your latest report card is not an official transcript.
- [] If you will be a freshman or are transferring from one school to another, enclose a copy of the acceptance letter from the college you will attend.
- [] Enclose three letters of recommendation (makes copies of appraisal form if necessary).

ALL MATERIALS MUST BE SUBMITTED BY **THE APRIL 1ST** APPLICATION DEADLINE. If you have not yet received your letter of acceptance from the college you will attend, please forward a copy of the letter as soon as it is available.