



## ACEC Indiana 2019 Scholarship Application

Complete *all* sections of this application to ACEC Indiana address below:

Name of Member Organization: ACEC Indiana

Address: 55 Monument Circle Suite 819

City, State & Zip Code: Indianapolis, IN 46204

Telephone (317) 637-3563 Email: staff@acecindiana.org

**Applicant's Name:** \_\_\_\_\_

I am applying for the following ACEC scholarship **(for ACEC Indiana use only)**

- General Scholarships – six available
- Specialty Scholarship – one CASE scholarship available

Note: To qualify for the CASE scholarship, you must be enrolled in a Master's degree program in Structural Engineering in the fall of 2019. Students who qualify for the CASE scholarship will also be eligible for the General scholarships.

---

In the fall of 2019, I will enter (indicate one):

- Junior year     Senior year     Fifth-year     Master's

College/University: \_\_\_\_\_

Degree/Discipline expected (with date): \_\_\_\_\_

---

Include certified grade transcript(s), *including 2018 Fall Semester*, and clearly identify your cumulative grade point average(s) on a *four-point scale*:

My Bachelor's (Undergraduate) GPA is: \_\_\_\_\_

My Master's GPA is: \_\_\_\_\_



**GENERAL INFORMATION**

Name: \_\_\_\_\_  
Home Address: **\*\* Note: full-time address MUST be in the state of Indiana to be eligible** \_\_\_\_\_  
\_\_\_\_\_  
College Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: Home: ( \_\_\_\_\_ ) \_\_\_\_\_ School: ( \_\_\_\_\_ ) \_\_\_\_\_  
Cell Phone: ( \_\_\_\_\_ ) \_\_\_\_\_  
Email Address: \_\_\_\_\_

**PERSONAL INFORMATION**

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Citizenship: \_\_\_\_\_  
Parent/Guardian: Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

**CURRENT COLLEGE/UNIVERSITY**

Name: \_\_\_\_\_  
Address: **\*\* Note: school MUST be in the state of Indiana to be eligible** \_\_\_\_\_  
\_\_\_\_\_  
Date Admitted: \_\_\_\_\_  
Degree/Discipline expected (with date): **\*\* Note: You must be pursuing civil, environmental, mechanical/ electrical, or structural engineering or a degree in land surveying** \_\_\_\_\_



---

## EDUCATIONAL BACKGROUND

List most recent additional educational institution first. Use additional sheets and attach if necessary.

College/University & Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dates of Attendance: \_\_\_\_\_ Degree/Discipline Awarded: \_\_\_\_\_

---

College/University & Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dates of Attendance: \_\_\_\_\_ Degree/Discipline Awarded: \_\_\_\_\_

---

College/University & Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dates of Attendance: \_\_\_\_\_ Date of Graduation: \_\_\_\_\_

---

Secondary School (High School) & City: \_\_\_\_\_

Dates of Attendance: \_\_\_\_\_ Date of Graduation: \_\_\_\_\_



---

## WORK EXPERIENCE

**Work experience is limited to the last three years prior to the date of your application.** List most recent work experience first. Use additional sheets and attach if necessary.

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Dates: \_\_\_\_\_ Total Time (Months): \_\_\_\_\_ Hrs/Weeks: \_\_\_\_\_

Supervisor's Name and Title: \_\_\_\_\_

Your Position: \_\_\_\_\_

Duties: \_\_\_\_\_

Year in School: \_\_\_\_\_ Type of Business: \_\_\_\_\_

---

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Dates: \_\_\_\_\_ Total Time (Months): \_\_\_\_\_ Hrs/Weeks: \_\_\_\_\_

Supervisor's Name and Title: \_\_\_\_\_

Your Position: \_\_\_\_\_

Duties: \_\_\_\_\_

Year in School: \_\_\_\_\_ Type of Business: \_\_\_\_\_



---

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Dates: \_\_\_\_\_ Total Time (Months): \_\_\_\_\_ Hrs/Weeks: \_\_\_\_\_

Supervisor's Name and Title: \_\_\_\_\_

Your Position: \_\_\_\_\_

Duties: \_\_\_\_\_

Year in School: \_\_\_\_\_ Type of Business: \_\_\_\_\_

---

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Dates: \_\_\_\_\_ Total Time (Months): \_\_\_\_\_ Hrs/Weeks: \_\_\_\_\_

Supervisor's Name and Title: \_\_\_\_\_

Your Position: \_\_\_\_\_

Duties: \_\_\_\_\_

Year in School: \_\_\_\_\_ Type of Business: \_\_\_\_\_



---

**COLLEGE ACTIVITIES**

**Indicate any leadership positions held in the listed activities or organizations.** Use additional sheets and attach if necessary.

Student Organizations: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Community Activities: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Organized Athletics and/or Musical Activities: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



Other: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

---

### ESSAY

On a separate sheet of paper write a short essay (approximately 500 words) on the following topic:  
***Describe how consulting engineers make their community a better place to live both technically and socially.***

Your interest, understanding and commitment to the business and management of the profession are important and should be reflected in the essay.

---

### PERMISSION TO RELEASE OR VALIDATE INFORMATION

By signing this application, I authorize ACEC and its state Member Organizations to confirm and/or release any information included on this application.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I have reviewed this application and I recommend the student for consideration.

Dean or Professor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## 2019 ACEC Scholarship Recommendation Form

Complete this form and return to the **Member Organization** address below by: **Feb. 1, 2019** \_\_\_\_\_

Name of Member Organization ACEC Indiana

Address 55 Monument Circle Suite 819

City, State & Zip Code Indianapolis, IN 46204

Telephone (317) 637-3563 Email staff@acecindiana.org

Name of Student: \_\_\_\_\_

Name of School: \_\_\_\_\_

Degree/Discipline Expected: \_\_\_\_\_

Date Expected: \_\_\_\_\_

---

Your Name: \_\_\_\_\_

Title: \_\_\_\_\_

Organization: \_\_\_\_\_

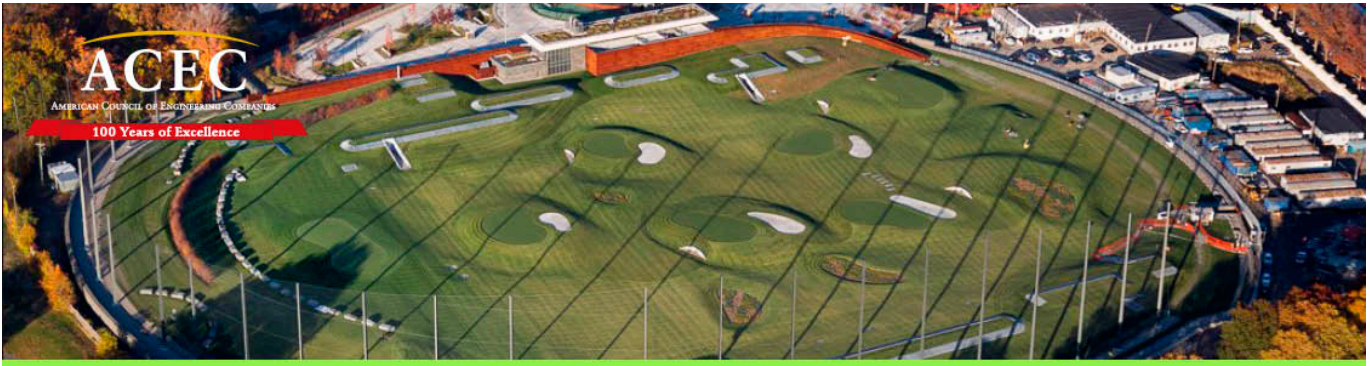
You are (indicate one):    Engineering professor \_\_\_\_\_ Consulting engineer \_\_\_\_\_ Land Surveyor \_\_\_\_\_

Address: \_\_\_\_\_

How long, how well, and in what capacity have you known the applicant?: \_\_\_\_\_

\_\_\_\_\_





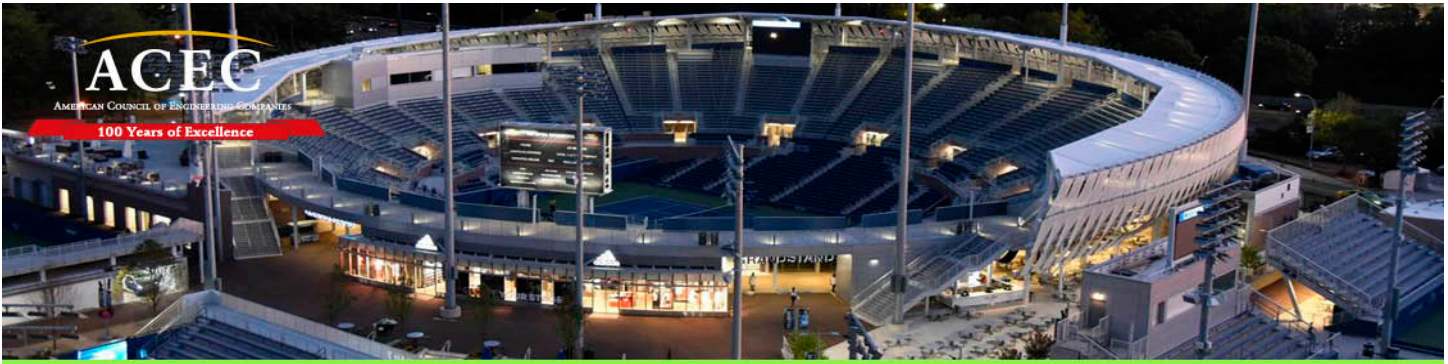
Please rate the student in each of the following categories (rating 1, 2, 3, 4, or 5; with 1 the lowest and 5 the highest). **Rate each category as best you can, do not leave any category without a rating point.**

	Rating	Use space below to explain your answers
Cooperation	_____	_____
Leadership	_____	_____
Initiative	_____	_____
Industrious	_____	_____
Dependability	_____	_____
Courtesy	_____	_____
Maturity	_____	_____
Self-control	_____	_____
<b>TOTAL POINTS</b>	_____	

Why will the student be a good engineer? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



## 2019 ACEC Scholarship Application Checklist

Applicant: \_\_\_\_\_

MO: ACEC Indiana, 55 Monument Circle, Suite 819 Indianapolis, IN 46204

Reviewed by (MO Representative): Shelby Courtney, staff@acecindiana.org

Date: \_\_\_\_\_

- Official ACEC Application Form
- Sent Official Transcript- Including 2018 Fall Semester Grades**
- ABET Accredited Engineering Program under **Engineering Accreditation Commission (EAC)**
- Properly Signed by Applicant
- Properly Signed by Dean or Professor
- Essay
- ACEC Recommendation Form
- Mailed to ACEC Indiana Office or emailed to [staff@acecindiana.org](mailto:staff@acecindiana.org)**

### **How did you hear about the 2019 ACEC Scholarship? (Select all that apply)**

- Intern/ co-op at an ACEC Indiana member firm
- Collegiate staff/ faculty
- Financial staff at university
- University website or social media
- ACEC Indiana Social Media
  - Facebook
  - Twitter
  - LinkedIn
  - ACEC Indiana Direct Mail
- ASCE Student Chapter
- Other Engineering Student Chapter (please specify): \_\_\_\_\_
- Other (please specify): \_\_\_\_\_