



Sacramento Valley Association of Building Officials

2019 SVABO Jack Atkins Memorial Scholarship Notice of Availability

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Applications are being accepted for the 2019 SVABO Jack Atkins Memorial Scholarship, established in the memory of John "Jack" Atkins, a long-time member and past President of the Sacramento Valley Association of Building Officials (SVABO). Jack was a firm believer in the value of education for everyone, and the learning should have no limits. In this spirit, SVABO is offering scholarships for education pursuits to members of SVABO and their immediate family members.

Rules and Conditions of Scholarship Award:

Eligibility for a SVABO Jack Atkins Memorial Scholarship is limited to members of SVABO, and immediate family member of a SVABO member, or a letter of sponsorship may be submitted on behalf of the applicant by a current SVABO member. Immediate family is defined as the member's husband, wife, or children under the age of 30.

The scholarship must be for attendance at a college, trade school, or other institution of learning with an academic course, certification program, trade or technical course, or other education program.

Jack Atkins Memorial Scholarship awards will not exceed \$1000 to any one individual in any single year.

Persons awarded a scholarship must agree to the use of their name and some of the general information regarding their educational goals as stated in the required application for purposes of announcing the award and promotion of the SVABO Jack Atkins Memorial Scholarship.

All awards are made at the sole discretion of the SVABO Scholarship Committee. Award information will not be given over the telephone.

How to Apply:

Applications are available at the SVABO website (www.svabo.org) or by calling SVABO at (916) 451-9093

Applications must be received by the SVABO Scholarship Committee **on or after April 1, 2019 but not later than May 31, 2019**. Applications postmarked after May 31, 2019 will not be considered. Applications must be filled out completely and typed or neatly printed with the required attachments.

Mail applications to: SVABO Scholarship Committee
700 R Street, Suite 200
Sacramento, CA 95811

Or, email digital application to kschrimsher@svabo.org

Uniform Code - Uniform Enforcement

700 R Street, Suite 200, Sacramento, California 95811
(916) 451-9093 www.svabo.org



2019 SVABO Jack Atkins Memorial Scholarship Application Form 2019

Personal Data:

1. Name of Applicant: _____

Primary Telephone: _____

Email: _____

Home Address: _____

City: _____ State: _____ Zip: _____

2. SVABO membership: Member Immediate Family Member Letter of Sponsorship

Relationship to Applicant: _____

Applicant's Date of Birth: _____

Employer of Immediate Family Member: _____

Company / Jurisdiction: _____

Address: _____

City: _____ State: _____ Zip: _____

Primary Telephone: _____

Years with Company / Jurisdiction: _____

Years in Building Industry: _____

Program Information:

3. Type of Educational Enrollment: Trade School Certification Course
 College Post-Graduate
 Other:

4. Name of Course/Program of funds are to be applied to: _____

Cost of Course/Program: _____ Have you been accepted? Yes No

5. Name of Institution/Organization providing Course: _____

Date Course/Program Begins: _____

Phone Number and Address of Institution Financial Aid Office: _____

Address: _____

City: _____ State: _____ Zip: _____

Uniform Code - Uniform Enforcement



2019 SVABO Jack Atkins Memorial Scholarship Application Form 2019

Required Documents:

The following documentation must accompany the application and be organized as outlined below.

1. Confirmation of the course registration information for the educational institution.
2. Information brochure and/or documentation detailing the course of study.
3. Dates and location of the course.
4. Total cost of the course or program.
5. Please attach a letter addressed to the SVABO Scholarship Committee (500 words or less), written and signed by you, that tells why you want to take the identified course or program, and how you think it will help you **grow in your personal or professional life, and benefit the community**.
6. Please attach a letter addressed to the SVABO Scholarship Committee from a family member, colleague, supervisor, or other person who will express their observations of your personal or professional growth and how the identified program or course of study will help you grow **and benefit the community**. The writer must sign the letter.

Certification:

I certify that the information provided in the application is true and accurate. I understand the information provided becomes the property of the SVABO Scholarship Committee, and awards are granted at the sole discretion of the SVABO Scholarship Committee. In the event an award is made to me, I understand my name and some of the information provided regarding my educational goals maybe used for promotional purposes.

Applicant's Signature: _____ Date: _____

If the applicant is not a member of SVABO, the sponsor who is a member must also sign this certification.

Sponsor's Signature: _____ Date: _____

If you have any questions, contact the SVABO offices at (916) 451-9093, or email at kschrimser@svabo.org