

APPLICANT INFORMATION

Name		
Permanent Address		
City	State	Zip
Phone Number	Email	

DEALERSHIP INFORMATION

Dealership Name		
Dealership Address		
City	State	Zip
Phone Number	Fax Number	
Dealership Contact	Email	

EDUCATION INFORMATION

School/Program You Plan to Attend		
School/Program Address		
City	State	Zip
Phone Number	Fax Number	
School Contact	Email	

I am enrolled or will be enrolling in the following type of education program (check all that apply)

Adult Education	
2-Year Association Program	
4-Year Baccalaureate Program	
Post-Graduate Program	
Vocational Program/Tech School	
Other:	
Course of Study (Major)	Current GPA
Expected Date of Graduation/Completion	

PERSONAL STATEMENTS

1. What attracted you to a career in the equipment industry? (200 words or less)

2. Why do you deserve this scholarship? (200 words or less)

3. Is there any additional information about yourself that you would like to share with the Selection Committee (not required, 200 words or less)

ADDITIONAL INFORMATION

Please list any awards/honors you have received.

Please list any previous work experience, extracurricular or community activities that you are involved in.

I understand that the Equipment Dealers Association EDF Annual Scholarship Program required a matching contribution of up to \$1,000 from an EDA Member Dealership in good standing. I further understand that any breach of enrollment or other unsatisfactory performance in my course of study will result in cessation of aid and the unused EDF scholarship funds must be returned to the foundation.

By electronically signing and dating below, I hereby confirm the accuracy of the information provided within this application.

Applicant Name	Date
Sponsoring Dealer Contact Name	Date

If you are awarded a scholarship from the EDF, you will be required to send a photo of yourself at your sponsoring dealership and the name(s) of any local papers/media no later than July 1, 2019.

If you have not been issued a transcript, please explain why:

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