



## **2015 COLLEGE SCHOLARSHIPS**

**To: Peninsula District AGC Members**  
**From: Don Sproul, District President**

It is time once again to begin the search for potential scholarship recipients! Awards will be made in December, 2015 and recognition of recipients announced at the 2016 New Year Party. **We want to help students! Please help us by getting this information to your employees! Both 2 and 4-Year school applicants are eligible!**

**SUGGESTION:** When you receive this announcement, please **post it** in a prominent place **and/or send it as a payroll stuffer to all employees!**

**Eligibility requirements** for this scholarship are as follows:

1. Applicant must be enrolled in an accredited two-year or four-year college, university or trade school.
2. Applicant must be pursuing a construction-related curriculum.
3. Applicant must be one of the following:
  - A. An employee of a Peninsula AGC firm
  - B. An immediate family member of an employee of a Peninsula AGC firm.
  - C. A member of an AGC Student Chapter

If no eligible, qualified student applies, the Scholarship Committee, with the approval of the District Executive Committee, has the discretion to award the scholarship to any deserving college student.

**Don't wait – Notify Employees NOW! The deadline for returning all applications to the Peninsula AGC is December 1, 2015.**

**TO OBTAIN A SCHOLARSHIP APPLICATION, VISIT  
AGC'S WEBSITE [WWW.AGCVA.ORG](http://WWW.AGCVA.ORG)**

**OR CONTACT:**



**DICK MOYERS  
EXECUTIVE DIRECTOR  
AGC OF VIRGINIA, INC.  
P. O. BOX 5700  
GLEN ALLEN, VA 23058  
(804) 364-5504 EXT. 203**



# Evaluation Sheet –

*To be completed by a school faculty member*

**Date:** \_\_\_\_\_ **Name of Student:** \_\_\_\_\_

The student indicated above has applied for a scholarship from the Peninsula District of the AGC of Virginia to study construction or civil engineering. Your name has been provided to us as a reference. Since your evaluation is an important factor in our review process, please explain your comments fully. You may use the reverse side of this form for additional remarks. Comments will be used for evaluation purposes only.

**Please complete this form and mail it to the AGC of Virginia, Inc.,  
Peninsula District, c/o Dick Moyers, P.O. Box 5700, Glen Allen, VA 23058  
so that we will receive it by December 1, 2015.**  
*The applicant is considered responsible for submission of all required forms by this date.*

Name of Evaluator: \_\_\_\_\_

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

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

How long have you known the applicant? \_\_\_\_\_

Furnish information on the nature and frequency of your contacts and observations of the applicant

\_\_\_\_\_  
\_\_\_\_\_

**Evaluation of Social & Personal Traits:** Please rate each characteristic listed. If you would like to make additional comments about the applicant, please use the reverse side of this form.

<b>Rating:</b>	<i>Poor</i>		<i>Below Average</i>		<i>Average</i>		<i>Above Average</i>		<i>Superior</i>		
	0	1	2	3	4	5	6	7	8	9	10

Cooperation
Courtesy
Timeliness & completeness of assignments
Participation in extra. activities
Initiative
Leadership
Maturity
Personal appearance

Using the above evaluation, indicate your opinion of the applicant's ability to select a goal and achieve it

\_\_\_\_\_

The student's estimated grade point average is \_\_\_\_\_ on a 3, 4, 5 or 6 point scale (please circle one)

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



**Associated General Contractors of Virginia, Inc.**  
*Peninsula District*

**UNDERGRADUATE SCHOLARSHIP COMPETITION**

**Applicant: Please complete all sections of this application and mail it to the AGC of Virginia, Inc., Peninsula District, c/o Dick Moyers, P.O. Box 5700, Glen Allen, VA 23058 so that we will receive it by December 1, 2015.** Use N/A if a question does not apply. Please type or print using ink. Appearance and completeness of application will be considered during evaluation.

**I. PERSONAL**

Name: \_\_\_\_\_ SSN#: \_\_\_\_\_  
Last First Middle

Address: Home: \_\_\_\_\_  
Number & Street City, State & Zip

College: \_\_\_\_\_  
Number & Street City, State & Zip

Email: Home: \_\_\_\_\_ College: \_\_\_\_\_

Telephone: Home: \_\_\_\_\_ College: \_\_\_\_\_

Present Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Martial Status: \_\_\_\_\_ Spouse's Name: \_\_\_\_\_

Spouse's Occupation: \_\_\_\_\_ Spouse's annual income: \_\_\_\_\_

Number of Dependents other than spouse: \_\_\_\_\_

Parent or legal guardian's name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Address, if different than item above: \_\_\_\_\_

**II. SCHOLASTIC INFORMATION**

Provide name, city, state of high schools, colleges and/or universities you have attended or are currently attending. **Most recent first.** Be sure to indicate month and year of anticipated graduation and grade point average.

Four Year College	Attended (from-to)	Major	Anticipated month & year of graduation
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a. \_\_\_\_\_

b. \_\_\_\_\_

Two-Year College      Attended (from-to)      Major      Date of Graduation  
\_\_\_\_\_

High School      Attended (from-to)      Major      Date of Graduation

a. \_\_\_\_\_

b. \_\_\_\_\_

Provide a chronological history of your activities if NOT continuously enrolled in school since high school graduation. History should begin immediately after high school graduation until the present time. Include specific month, year, and type of activity. *Add additional sheets if necessary.*

\_\_\_\_\_

\_\_\_\_\_

Current rising year in college (*circle one*)    Freshman    Sophomore    Junior    Senior  
Other (*specify*) \_\_\_\_\_

If you are planning to transfer to another school, list below those colleges to which you have applied or in which you intend to apply (*in order of preference*):

College (name, city & state)	Accepted (Y/N)	Anticipated Mo/Yr of Graduation
_____		
_____		

In what program do you expect to get your degree? \_\_\_\_\_

What construction career would you like to pursue? \_\_\_\_\_

Are you enrolled in a Cooperative Education Program? \_\_\_\_\_  
*If so, include a copy of your work/class schedule.*

Specify current GPA: \_\_\_\_\_ (3, 4, 5 or 6 point scale - *please circle one*)

In what extracurricular activities have you participated while attending High School? College? Indicate elected offices held, if any. Specify purpose of local organizations. *Add additional sheets if necessary.*

1. Student Activities (Student Government, National Honor Society, etc.)  
\_\_\_\_\_
2. Community Activities (Boy Scouts, etc.)  
\_\_\_\_\_
3. Athletics  
\_\_\_\_\_

4. Other

\_\_\_\_\_

### III. EMPLOYMENT HISTORY

List below full-time employment, summer employment, or other part-time work, briefly explaining duties and responsibilities (beginning with your most recent job). If part time work, indicate number of hours per week. *Add additional sheets if necessary.*

1. From \_\_\_\_\_ to \_\_\_\_\_, 20 \_\_\_\_\_

Firm name & type of business \_\_\_\_\_

Address \_\_\_\_\_

Supervisor's name & position in company \_\_\_\_\_

Your duties \_\_\_\_\_

Salary \_\_\_\_\_

2. From \_\_\_\_\_ to \_\_\_\_\_, 20 \_\_\_\_\_

Firm name & type of business \_\_\_\_\_

Address \_\_\_\_\_

Supervisor's name & position in company \_\_\_\_\_

Your duties \_\_\_\_\_

Salary \_\_\_\_\_

3. From \_\_\_\_\_ to \_\_\_\_\_, 20 \_\_\_\_\_

Firm name & type of business \_\_\_\_\_

Address \_\_\_\_\_

Supervisor's name & position in company \_\_\_\_\_

Your duties \_\_\_\_\_

Salary \_\_\_\_\_

### IV. FINANCIAL INFORMATION

Brothers and sisters in family older you? \_\_\_\_\_ Younger than you? \_\_\_\_\_

What percent of your college education and living expenses do you provide or expect to provide this school year ? \_\_\_\_\_

Including yourself how many members of your immediate family will be in college next year? \_\_\_\_\_ How many are receiving financial assistance in the form of scholarships or grants? \_\_\_\_\_

Describe briefly in dollar amounts estimated college costs for the following items (per year):

Tuition: \_\_\_\_\_ Living Expenses: \_\_\_\_\_

Books: \_\_\_\_\_ Misc. (*specify*): \_\_\_\_\_

Indicate the amount of support from the following sources:

Summer work: \_\_\_\_\_ Part-time work: \_\_\_\_\_

Loans (*specify*): \_\_\_\_\_ Scholarships: \_\_\_\_\_

Other sources of income (*specify*): \_\_\_\_\_

Please explain the purpose for which scholarship monies will be used:

\_\_\_\_\_

## V. ADDITIONAL INFORMATION

Answer the following questions using *only the space provided*.

Why are you interested in a construction industry career and what event or series of events has led you to this decision?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you or any members of your immediate family presently employed in the construction industry by an AGC member company? If not, are you a member of an AGC student chapter?

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Employer \_\_\_\_\_ Position in Company \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Employer \_\_\_\_\_ Position in Company \_\_\_\_\_

**I agree that this application and all attachments may be used for the purposes of evaluation and selection for AGC of Virginia - Peninsula District scholarships.**

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