

AUXILIARY
OF THE
NEW YORK STATE ASSOCIATION
OF
PLUMBING • HEATING • COOLING CONTRACTORS
ORGANIZED 1928

SCHOLARSHIP RULES

1. Applicant must be a **member** of the **senior class** in High School **or** currently enrolled in an **undergraduate full-time college program** (12 or more credit hours).
2. **Personal Letter:** Applicant must write a letter to include personal data; i.e., family size, need of scholarship monies, and career plans. If related to a member of the New York State Association of PHCC, applicant should include that information. Knowledge of and/or working experience with the Plumbing Heating and Cooling industry can be included but is not necessary.
3. **Principal/Dean/Advisor's Letter:** **High School** applicant must enclose a letter of recommendation from the Principal or authorized member of the high school staff. It should include a complete transcript of the grades, college entrance exam scores and cumulative GPA. **College** applicant must include a letter of recommendation from the Dean or Advisor of the College and an official transcript of grades and cumulative GPA. If this information is coming directly from the school to the Scholarship Committee Chairperson, the full address should be indicated on the application. A college freshman preparing to enter sophomore year must also include a high school transcript.
4. **Reference Letters:** Applicant must enclose two reference letters (in addition to Principal/Dean/Advisor's letter). The Auxiliary member signing the application must write one letter. This member must have been enrolled for the previous year and must be currently enrolled with the Auxiliary NYSPHCC. He/She must know the applicant personally and attest to the applicant's character and other pertinent information. This person may be a relative, excluding parents. The second letter must be from someone, not related to the applicant, who knows the applicant personally and can attest to the applicant's character and other pertinent information.
5. **Activity Form:** Applicant must enclose a complete activity sheet, using the sample copy as a guideline.
6. Applicant should submit the **original and two copies of all documents.**
7. Send Application and all completed forms to: **Marilyn Doughty
201 Hillside Ave
Williston Park, NY 11596**

NO COMPLETED APPLICATION WILL BE ACCEPTED AFTER A MARCH 15, 2018 POSTMARK.

8. No person may receive more than one award during his/her academic career and no family may receive more than two awards per year. A permanent current list of those who are awarded scholarships will be kept in the scholarship files.
9. The Scholarship Committee shall have the final decision in awarding scholarships. The Chairperson shall notify the winner(s) in writing. The winner(s) will then forward the requested information to the Auxiliary State Treasurer who will send a check, made payable to the designated school, along with a cover letter. Failure to abide by the above State rules will cause the scholarship monies to be refunded to the Auxiliary of the NYSPHCC Association. Award will be sent directly to the school.
10. Scholarship applications can be obtained from Auxiliary members. **It is the responsibility of the applicant to obtain the application and scholarship rules and to follow all instructions completely. Incomplete applications are not acceptable.**
11. An applicant who wishes to receive an acknowledgement of receipt of application should enclose a stamped, self-addressed envelope.

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PLUMBING - HEATING - COOLING CONTRACTORS**

SCHOLARSHIP APPLICATION

APPLICANT INFORMATION:

LAST NAME: _____ FIRST NAME: _____ MI: _____ AGE: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP CODE: _____

TELEPHONE NUMBER: _____

PARENT or GUARDIAN'S FULL NAME: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP CODE: _____

SPONSORING AUXILIARY MEMBER'S SIGNATURE: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP CODE: _____

CAREER PLANS:

What career do you intend to follow?

What school are you planning to attend or attending now?

SCHOOL ADDRESS: _____ CITY: _____ STATE: _____ ZIP CODE: _____

DATE OF ENROLLMENT: _____

SCHOLASTIC DATA: HIGH SCHOOL ATTENDED/ATTENDING: _____

YEAR OF GRADUATION: _____ PRINCIPAL'S NAME: _____ GPA: _____

NAME OF COLLEGE (if currently attending): _____

DEAN or ADVISOR'S NAME: _____ GPA: _____

SCHOLARSHIP APPLICATION INSTRUCTIONS

1. Read SCHOLARSHIP RULES.
2. Complete application. DO NOT LEAVE ANY BLANKS.
3. Send the original and two copies of the following items:
 - a. Scholarship Application
 - b. Personal letter giving full details of education plans.
 - c. Reference letters as detailed in the SCHOLARSHIP RULES.
 - d. Letter and transcript from Principal or authorized member of current high school or college staff.
 - e. Separate list of extracurricular school or community activities.
4. Please indicate if transcript is being sent directly from school. YES _____ NO _____

I hereby certify that the above is true and accurate.

APPLICANT'S SIGNATURE: _____ DATE: _____

PARENT/GUARDIAN'S SIGNATURE: _____ DATE: _____

Send all application materials to:

Marilyn Doughty
201 Hillside Ave

Must be post-marked by March 15, 2018.

Williston Park, NY 11596
SAMPLE ACTIVITY SHEET

Please use the following general format in completing your personal Activity Sheet.

I. School

A. High School

1. Debate Team - - 3, 4
2. Basketball Team - - 1, 2, 3, 4 Sr. Year: County All-Star
3. National Honor Society - - 3, 4 Sr. Year: President

B. College (if applicable)

1. Dorm Floor Advisor - - 2 semesters
2. Intramural Basketball - - 1, 2
3. Open House Guide - - Fall '16

II. Community

1. Club Swim Team '13 - - '16, Coach - - Summer '16
2. Church Youth Choir - - 3 years
3. Red Cross Volunteer - - Blood Bank (twice a year)

III. Awards

1. Optimist Essay Contest Winner - - 2015
2. National Merit Finalist
3. College Dean's List - - Freshman (1st & 2nd semesters)

IV. Work Experience

1. Pizza Hut Delivery – 2015-Present
2. Lifeguard - - Summers 2014-16
3. Sears - - Part-Time Retail - - 2014-15