

WALLACE COMMUNITY COLLEGE LINEWORKER PROGRAM

ELIGIBILITY

Wiregrass Electric Cooperative (WEC) members and their dependent children (including legal guardianship) are eligible. Applicant's permanent legal address must be a home served by WEC. Applicants must meet the requirements listed below.

Applicants for this scholarship should be interested in pursuing Wallace Community College's Pre-apprentice Electrical Lineworker program and show demonstrated financial need.

LIMITATIONS

1. Scholarship recipients are subject to certain terms and conditions;
2. Scholarship funds must be claimed in a single payment, made in the academic year the scholarship was awarded. Applicant must prove eligibility. Funds cannot be deferred without express permission from Operation Round Up Charitable Foundation's board of trustees;
3. Scholarships are nonrenewable;
4. Scholarship funds are paid directly to the educational institution for credit to the student's account;
5. Unused funds must be returned to the Operation Round Up Charitable Foundation;
6. Student must attend the institution on a full-time basis. Failure to qualify as full time will result in forfeit of funds. Student must request written verification of eligibility from their educational institution;
7. Any scholarship winner who learns that he or she will receive a full scholarship from another source must notify WEC and relinquish all claims to the Operation Round Up scholarship.

REQUIREMENTS

Recipients are subject to conditions of enrollment, usage of funds, scholastic achievement, leadership, service and work experience, career and life goals, and other criteria, including good moral character. Consideration is not based solely on need. Applications must be typed.

Applicant must have a:

- High school diploma or equivalent
- Department of Transportation (DOT) physical examination
- Two-year driving history from the state troopers office



2018 Scholarship Application

WEC Operation Round Up Charitable Foundation • P.O. Box 158 • Hartford, AL 36344 • 800-239-4602

In addition, applicants should:

- Be at least 18 years of age by the start date of the term selected;
- Provide proof of medical insurance coverage of the duration of the program;
- Not have a felony conviction on your record.

Applicants are required to submit the following information separately:

- Copy of high school transcript or equivalent
- Department of Transportation (DOT) physical examination results
- A two-year driving history from the state troopers office
- A full-page essay, typed and double-spaced, describing why you want to be a lineworker and what you believe are the most important qualities of being a lineworker
- Three (3) letters of recommendations from adult, non-family members (employer, teacher, religious leader, mentor, club sponsor, coach, etc.)
- An "Educator Recommendation Form" (located on Page 5 of this application)
- Financial Disclosure: Include most recent IRS income tax filing.
- Special financial circumstances: Please list circumstances we should take into consideration, if any.

DEADLINE

Application and all supporting documents must be postmarked by September 3, 2018. Late or incomplete applications will be disqualified.

INSTRUCTIONS

- Application and attached forms must be typed. This application is available as a fill-in-the-blank PDF document at www.wiregrass.coop or at any WEC office.
- Paper clip application only. Do not staple or insert into a binder.
- Please use the official application form. If additional space is needed, typed attachments are acceptable.

**Application and all supporting documents must be postmarked by September 3, 2018.
Mail to: WEC Operation Round Up Charitable Foundation • P.O. Box 158 • Hartford, AL 36344**



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Late or incomplete applications will be disqualified. Student must reside in a residence served by WEC. Pages 3 and 4 of application must be typed.

Applicant: _____
Last name First Name Middle Initial Last 4 Digits of SSN

Parent/Guardian: _____
Last name First Name Middle Initial

Physical Address Mailing Address

City County State ZIP Code

Telephone Number Wiregrass Electric Cooperative Member #

Are you a U.S. Citizen? _____ If not, how long have you lived in the U.S.? _____

High School Information

Your High School Name: _____

GPA: _____ Check if Weighted Graduation Date: _____

Or, please attach a copy of your GED certificate.

(For the questions below: Additional sheets are acceptable if more space is needed.)

Scholarships or Grants – Applied for or Received

Name of Scholarship Amount Renewable? - Y/N Years

Community & Extracurricular Activities, Clubs, Organizations and Volunteer Service

Activities (in priority order) Dates Hours per Week

Honors and Awards

Honor/Award Name

Year Received

Employment Information

Applicant:

Job 1 Title: Address: City: State: ZIP Code: Hours per Week:

Description (Nature of Work, Employer, Dates of Employment)

Job 2 Title: Address: City: State: ZIP Code: Hours per Week:

Description (Nature of Work, Employer, Dates of Employment)

Employment of all other members of the household:

Name: Employer: Address: City: State: ZIP Code: Hours per Week:

Other Members Living in the Household

Last Name: First Name: Relationship: Attending College? Y/N:

List any other special financial considerations: _____

The information contained in this statement is for the purpose of obtaining funding from Wiregrass Electric Cooperative's Operation Round Up Charitable Foundation (ORU), on behalf of the undersigned. Each undersigned understands that the information provided herein is used in grant funding decisions, and represents and warrants that the information provided is true and complete, and that ORU may consider this statement as continuing to be true and correct until a written notice of a change is provided. ORU is authorized to make all reasonable inquiries deemed necessary to verify the accuracy of the statements made herein. I hereby grant consent for Wiregrass Electric Cooperative to publish the applicant's name and pertinent information in newspaper, magazine and other publication types.

Applicant Signature

Parent/Guardian Signature

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2018 Educator Recommendation Form

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Applicant: _____
 Last name First Name Middle Initial

High School City State ZIP Code

To be completed by Educator or Guidance Counselor

How well, how long, and in what capacity do you know the applicant? _____

Successful students and graduates for the Wallace Community College Pre-apprentice Lineworkers Program are expected to arrive mentally and physically prepared; maintain a positive attitude; proficiently apply the knowledge, behavior and skills learned; and dedicate themselves to the program while on campus.

In comparison to other students whom you have known at comparable stages of development, how would you rate the applicant in the following areas? If unable to evaluate, leave blank.

Please circle one per line:	Below Average	Average	Above Average	Excellent
Seriousness of Purpose	1	2	3	4
Initiative	1	2	3	4
Maturity	1	2	3	4
Adaptability	1	2	3	4
Enthusiasm	1	2	3	4
Emotional Stability	1	2	3	4
Leadership	1	2	3	4
Public Speaking	1	2	3	4

List an example of how the student has demonstrated one of the qualities shown above. List any additional comments which you believe describe this student.

Signature Title or Position Date

Return this form to student in official sealed envelope on school letterhead.



Guidance Office Checklist

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(Student: Give this form to your Guidance Counselor)

Student Name: _____

Guidance Office: Please Complete and Sign

Confirm Yes or No:

(If "no," return to student. Incomplete applications will not be considered for scholarship funds)

- _____ 1. Sealed transcript is enclosed.
- _____ 2. Cumulative high school GPA is shown on application.
- _____ 3. Please include most recent IRS income tax filing.
- _____ 4. Student essay is a full page, typed and double-spaced, describing student's educational, career and life goals.
- _____ 5. Educator Recommendation Form and three (3) letters of recommendation are enclosed.
- _____ 6. Pages 3 and 4 of the Scholarship Application are typed. For convenience, an online fill-in-the-blank PDF application is available at www.wiregrass.coop.

Guidance Counselor Signature _____

Date _____

Application and all supporting documents must be postmarked by September 3, 2018.

Enclose with application and mail to:

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