



THE G3 INDUSTRIES SCHOLARSHIP AWARD

G3 SCHOLARSHIP USE ONLY	ID#	AA	PD	RIC/CS	GPA	SATCR	SATM	SATW	ACTC	TOTAL

Instructions: Please type or print all information except Signatures. If space provided in any section is inadequate, you may continue in the additional space on page 2 or on additional sheets of paper using the same format. DO NOT repeat information already reported on the application form. Your name, address and name of this scholarship program should be included on all attachments. Application postmark deadline: March 29th, 2019.

APPLICANT DATA

LAST NAME _____ FIRST _____ MIDDLE INITIAL _____
 PERMANENT ADDRESS _____ CITY _____ STATE _____ ZIP _____
 PHONE _____ DATE OF BIRTH _____
 EMAIL ADDRESS _____

PLEASE INDICATE YOUR STATUS (*voluntary self-identification/for statistical purposes only*)

Male American Indian/Alaskan Native Asian Native Hawaiian/Pacific Islander
 Female Black/African American Hispanic/Latino White Multi-racial

EMPLOYEE PARENT/GUARDIAN/STEPPARENT or GRANDPARENT INFORMATION

LAST NAME _____ FIRST _____ MIDDLE INITIAL _____
 JOB TITLE _____ DEPARTMENT _____ BRANCH _____
 WORK PHONE _____
 RELATIONSHIP TO APPLICANT _____
 EMAIL ADDRESS _____

IS APPLICANT A DEPENDENT THAT LIVES IN THE EMPLOYEE'S HOUSEHOLD OR IS PRIMARILY SUPPORTED BY THE EMPLOYEE? Yes No
 DOES ANYONE IN THE FAMILY CURRENTLY RECEIVE FREE OR REDUCED MEALS FROM SCHOOL? Yes No

HIGH SCHOOL DATA

SCHOOL NAME _____ GRADUATION DATE _____
 PHONE _____ CITY _____ STATE _____

POST-SECONDARY SCHOOL DATA

List name of post-secondary school you plan to attend or schools to which you applied in order of preference.

_____ CITY _____ STATE _____
 _____ CITY _____ STATE _____

YEAR IN POST-SECONDARY PROGRAM NEXT SCHOOL YEAR: 1 2 3 4 5 or Graduate Study

MAJOR/COURSE OF STUDY _____ ANTICIPATED GRADUATION DATE _____
Month Year

Please check all that apply to the student:

4 yr. College/University BA/BS Will live on campus Public, in-state resident tuition
 2 yr. College/Jr. College Associate Will live *off* campus Public, out-of-state tuition
 Vocational/Technical Certificate Commute from home Private institution



WORK EXPERIENCE

Describe your work experience **during the past four years** (e.g., food server, babysitting, cashier, office work).

Employer/Position	From-Mo. /Yr.	To-Mo. /Yr.	Hours per Week	Were you paid? Yes/No
				Yes/No
				Yes/No
				Yes/No
				Yes/No
				Yes/No

ACTIVITIES, AWARDS AND HONORS

List all school activities (e.g., student government, music, sport(s)) and all community activities (e.g., Boy/Girl Scouts, hospital volunteer, Special Olympics), in which you participated **for the past four years**. Note all special awards, honors and offices held. **Indicate whether high school or college activities:**

# Yrs. Participated	Activity	Special Awards/Honors	Offices Held

GOALS AND ASPIRATIONS

Make a statement of your plans as they relate to your educational and career objectives and long-term goals.

UNUSUAL CIRCUMSTANCES

Please describe how and when any unusual family or personal circumstances have affected your achievement in school, work experience, or your participation in school and community activities.



APPLICANT APPRAISAL (REQUIRED)

To be completed by a high school or college counselor or advisor, and instructor, or a work supervisor who knows you well. You have been asked to provide information in support of this application. Please give immediate and serious attention to the following statements. When complete, please return to applicant; or, photocopy this section and return to applicant in a sealed envelope, OR email for confidential consideration to g3scholarship@gmail.com.

The applicant's choice of a post-secondary education program is
 extremely appropriate very appropriate moderately appropriate inappropriate

The applicant's achievements reflect his/her ability
 extremely well very well moderately well not well

The applicant's ability to set realistic and attainable goals is
 excellent good fair poor

The quality of the applicant's commitment to school and/or community is
 excellent good fair poor

The applicant is able to seek, find, and use learning resources
 extremely well very well moderately well not well

The applicant demonstrates curiosity and initiative
 extremely well very well moderately well not well

The applicant demonstrates good problem-solving skills, follows through, and completes tasks
 extremely well very well moderately well not well

The applicant's respect for self and others is
 excellent good fair poor

COMMENTS _____

APPRAISER'S NAME _____ TITLE _____ WORK PHONE _____

SIGNATURE _____ ORGANIZATION _____ DATE _____

TRANSCRIPT INFORMATION

- Students currently or previously enrolled in college or vocational/technical school must** include all college or vocational/technical transcripts of grades. On-line transcripts must include student's name, school name, grades, number of credits and term in which credits were taken. Grade reports are not acceptable.
- High school seniors and students who have not finished one full semester** of post-secondary education **must** include a high school transcript of grades.

OTHER AWARDS

List the name and annual amount of any grants or scholarships you have been awarded for the coming school year only.

Name of Award	School to which award will be applied	Amount	Check One:	
_____	_____	\$ _____	<input type="checkbox"/> Granted	<input type="checkbox"/> Pending
_____	_____	\$ _____	<input type="checkbox"/> Granted	<input type="checkbox"/> Pending



APPLICATION CHECKLIST

The application for a scholarship becomes complete and valid only when you have returned all of the following materials: Student Application and Current Complete Transcript(s) of Grades (grading scale grade reports are not acceptable).

All materials, including transcripts must be addressed to:

The G3 Scholarship Committee

Scholarship Award
513 Grant Street
Wausau, WI 54403

The student is responsible for submitting all materials to G3 Scholarship Committee

Application postmark deadline: March 29th, 2019

OR

G3scholarship@gmail.com

SELECTION OF RECIPIENTS

G3 Scholarship Committee has the sole responsibility for selecting recipients basing the decision on criteria as set forth in the program's descriptive brochure. Decisions of Scholarship Committee are final.

CERTIFICATION

I certify that I meet the basic eligibility requirements of the program as described in the brochure and that the information provided is complete and accurate to the best of my knowledge. If requested, I agree to give proof of information I have given on this form, including a copy of my U.S. Income Tax Return. Falsification of information may result in termination of any scholarship granted. This application becomes the property of G3 Scholarship Committee.

Applicant: (It is recommended that you keep a copy for your files.)

APPLICANT'S SIGNATURE _____

DATE _____

EMPLOYEE'S SIGNATURE _____

DATE _____