

Application Form: Member Family Educational Grant Application

BUFFALO SECTION 0201

APPLICATION DEADLINE: September 30; Award determinations made in October; Awardees invited to December Holiday Party to share their story. The number of awardees are at the discretion of the Board; awards will be no less than \$500 and no more than \$2000.

Applicant Information

☒ If you are not yet enrolled but accepted to a program, include your acceptance letter and most recent transcript (e.g., high school or prior college).

Name of Applicant: _____

Address: _____

Cell Phone: _____

Email: _____

Relationship to ASQ Member

Name of ASQ Buffalo Section Member: _____

Relationship to Applicant: Child Grandchild Self

ASQ Member # of Buffalo Section Member: _____

Educational Program

Institution Name: _____

Field of Study / Program: _____

Student ID (if available): _____

Degree/Certificate Sought: _____

Enrollment Status: Accepted but not yet enrolled Currently Enrolled

Anticipated Start or Graduation Date: _____

If currently enrolled: GPA and school's scale (such as 4.0 scale): _____

If not yet enrolled: attach most recent school transcript and acceptance letter.

Personal Statement

Attach a typed 300–500 word statement addressing:

- ☒ What you hope to achieve through your education.
 - ☒ How you see the concept of “quality” playing a role in your education or career.
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Certification

By signing below, I certify that:

- I am the child, grandchild, or a current ASQ Buffalo Section 0201 student member in good standing.
- I agree to join ASQ Buffalo Section 201 as a student member prior to receiving the monetary award if selected as an awardee.
- The information provided is true and complete.
- I understand that award decisions are at the sole discretion of the ASQ Buffalo Section Board.

Applicant Signature: _____

Date: _____