2020 National Auxiliary Bradford White Industry Scholarship Rules

1. Individual scholarship awards of $500 or more will be announced at the PHCC—National Association Convention in the fall of the year.

2. The applicant must be employed by a PHCC—National Association member contractor who must be a paid member of the PHCC—National Association for a period of two years (including current year).

3. Applicant must enclose a letter providing details on the type of employment with employing member company, educational endeavors, and how the p-h-c industry relates to their work and life.

4. Applicant must enclose a letter written by the sponsoring Auxiliary Member signing his/her application. The sponsoring Auxiliary member must be a paid member of the PHCC—National Auxiliary for a period of two years (including current year). This person must know the applicant personally and attest to the applicant’s character and other pertinent information. The sponsor may be a relative, but excluding parents, guardian, or spouse. No member may sponsor more than two applicants per year, including all auxiliary scholarships.

5. Applicant must enclose a copy of proof of enrollment from the education facility. This may be in the form of a tuition invoice or verification of enrollment which shows the student is responsible for payment of the tuition.

6. The education facility must be an accredited school or program and must be registered with the Department of Labor. Applicant must include a letter from the facility that states their accreditation and their Department of Labor course registration number.

7. The original and two (2) copies of all application materials are required. Applications must include one wallet-size photograph with name lightly written or on a sticky note on the back.

8. All applications must have all required signatures.

9. **NO APPLICATION WILL BE ACCEPTED AFTER JUNE 15, 2020 POSTMARK.** There are NO exceptions. It is the applicant’s responsibility to contact the Scholarship Chair by email to ascertain that all application materials have been received in a timely manner.

10. The scholarship must be used for the current fall semester or upcoming spring semester and within 5 months of convention unless written permission for an extension is obtained from the Treasurer and Scholarship Chair. The winner will be notified in writing and will then forward the requested information (ex: proof of enrollment) by the required deadline to the PHCC—National Auxiliary Treasurer, who will then send a check to the educational facility. Failure to abide by the rules or if the recipient is unable to continue school as planned for any reason, the award check shall be returned to the PHCC—National Auxiliary Treasurer.

11. Please do not send any mail that will require a signature upon receipt.

12. The scholarship check may not be made payable to any individual. It can only be made payable to the institution listed on the original application. No substitutions on institutions will be permitted without prior consent of the Scholarship Committee at least 30 days prior to the National Convention.

Send application and completed forms to:

Jorja Dickemann, Scholarship Chairperson, 324 Glen Carbon Rd., Glen Carbon, Il 62034
Jorja_dickemann@charter.net
2020 National Auxiliary Bradford White Industry Scholarship Application

Date: __________________________

Name in Full: __________________________________________________________

Street Address: __________________________________________________________

City: ____________________________ State: ______ Zip Code: __________

Daytime Phone: ____________________________ Cell: ________________________

Email Address: __________________________________________________________

School Name and Address where check should be sent:

Name:______________________________________________________________

Street Address: __________________________________________________________

City: ____________________________ State: ______ Zip Code: __________

Attn: ________________________________

(This should be what department you want the check sent to for Financial Aid/Scholarships) Student ID: ________________

Name of Sponsoring Auxiliary Member

Must be Auxiliary member for two (2) years and who is NOT a parent, guardian or spouse.

Name: __________________________________________________________

Street Address: __________________________________________________________

City: ____________________________ State: ______ Zip Code: __________

Home Phone: ____________________________ Cell: ________________________

Signature of Sponsoring Auxiliary Member:

Signature: ____________________________ State: ______ Date: ________________

Name of Your Employer - Must be PHCC National Association Member for two (2) years.

Employer’s Name: ______________________________________________________

Company Name: ________________________________________________________

Phone Number: ____________________________ Fax Number: ___________________

Signature of Employer:

Signature: ____________________________ Date: ____________________________

Career Plans

Career you intend to pursue: _____________________________________________

School attending: ______________________________________________________

School address: ________________________________________________________

City: ____________________________ State: ______ Zip Code: __________

Date of enrollment: ____________________________
Application Checklist

1. Read the Scholarship Rules.
2. Fill out application completely (Do not leave lines blank), especially signatures.
3. Send original and two copies, total of (3) copies of the following:
   A. The Scholarship Application
   B. Personal letter with full details of: type of employment, educational endeavors and how PHCC relates to their work and life
   C. Letter from sponsoring PHCC Member Employer
   D. Letter from sponsoring Auxiliary Member
   E. Proof of enrollment from the education facility, proof the facility is accredited and registered with registration number with the Department of Labor.
4. Send one wallet-size picture of yourself with name lightly printed on back.

I hereby certify that the above is true and accurate.

Applicant’s Signature: ___________________________ Date: ______________