

Amy Lynn Pretorius Endowed Scholarship Fund Application



Applicants must meet all of the following requirements:

- 1) Must be a female resident of Iowa
- 2) Must be enrolling in, or attending, an accredited post-secondary school in Iowa
- 3) Must be enrolled in a construction-related curriculum
- 4) Application must be postmarked by April 15. Submission instructions are on page 4.

Instructions:

1. Answer all questions. Note "N/A" if not applicable.
2. Do not staple or bind any application materials.
3. Print legibly in pen or type.

Student Information:

Name: _____
Permanent Address: _____
City: _____ State: _____ Zip: _____
Date of Birth: _____ Last 4 Digits of Social Security Number: ____ _
Home phone number: _____ Cell phone
number: _____
Email: _____ *(This is our primary way of contacting you.)*

Academic Information:

Name, city of current school attending: _____
Graduation date: _____
College planning to attend: _____ Campus site: _____
(Note: You must attend a college in Iowa to be considered for the scholarship.)
Are you currently enrolled in this college? Yes No
If so, what will be your status in the fall?
Four-year college: Freshman Sophomore Junior Senior
Two-year/trade school: 1st Year 2nd Year
Planned Field of Study (your major): _____
(Note: Planned field of study must be construction-related—example: plumbing, electrical technology, carpentry, etc.)
Career Objective (what you want to do for a career): _____

Family Information:

Are you dependent or independent

If independent, please skip to spouse information.

Father: Living Deceased

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Occupation: _____

Mother: Living Deceased

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Occupation: _____

Number of older brothers or sisters: _____

Number of younger brothers or sisters: _____

How many siblings currently attend college? _____

If independent, complete spouse information:

Spouse: Living Deceased Not Applicable

Name: _____

Occupation: _____

Number of Dependents: _____ Age(s) of Dependent(s): _____

Asset Information:

How do you plan to finance your education? (Check all that apply)

Loans Yes No

Scholarships Yes No

Family Contributions (including support from parents, step-parents, spouse, and other contributions) Yes No

Job Earnings - Are you currently employed? Yes No

Place of employment: _____ Salary: \$ _____

Will you be employed while you are in school? Yes No

If dependent, circle your family's approximate total annual income range:

\$0-\$29,999 \$30,000-\$49,999 \$50,000-\$64,999

\$65,000-\$79,999 More than \$80,000

Savings

Other (please list) _____

Please note other financial information to be considered: _____

Please **describe your goals as they relate to the housing industry.** (Use additional paper if necessary.)

Please list any school, community, or church activities in which you have participated.

Is anyone in your family a member of a Home Builders Association? Yes No

If yes, family member's name: _____

Relationship to you: _____

Company Name: _____

Which Home Builders Association are they a member of? _____

Applicant must provide the following:

- Minimum of one letter of recommendation. (must be signed and preferred on letterhead)
- Proof of Iowa Residency (example: copy of driver's license, copy of utility bill, etc.)

CERTIFICATION AND AUTHORIZATION:

I hereby certify that the information contained in this application is true and correct. I authorize the scholarship committee to make such investigation of this application as it deems appropriate, to include the contacting of any of the individuals or institutions referred to in the application. I understand that the falsification of any information contained in this application will disqualify me from further consideration or receipt of funds from the scholarship.

Signature of Applicant

Date

Deliver completed application with requested documents no later than April 15th to:

**By mail: The Greater Iowa City Area Home Builders Association
11 South Gilbert
Iowa City, IA 52240**

By email: eo@hbaofic.org

Questions? Call Ali Salow at 319-351-5333