



**WASA Scholarship Program  
FALL 2021**

**SECTION 1  
APPLICATION INFORMATION**

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\_\_\_\_\_  
LAST NAME FIRST NAME MIDDLE INITIAL

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
CITY STATE MAIL CODE (ZIP)

\_\_\_\_\_  
DATE OF BIRTH ( ) PHONE NUMBER with AREA CODE

\_\_\_\_\_  
EMAIL ADDRESS

Applicant is:

- Family Member of WASA Installing/Serviceing Dealer Member

\_\_\_\_\_  
Name of Sponsoring Relative Relationship to Applicant

- Employee of WASA Installing/Serviceing Dealer Member  
 Family Member of Employee of WASA Installing/Serviceing Dealer Member

\_\_\_\_\_  
Name of Sponsoring Relative Relationship to Applicant

## SECTION 2 SCHOOL INFORMATION

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\*All types of schools are eligible providing that they are accredited, certified or licensed by the state.

\*\*Vocational, Technical and Trade School degree/diploma or similar certification program applicants must attach a school brochure that explains the program in which the applicant will be enrolling and confirms and verifies the school's accreditation, state certification or license.

SCHOOL NAME \_\_\_\_\_

SCHOOL ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_

GRADE POINT AVERAGE (4.0 GPA SCALE) \_\_\_\_\_

- Official Transcript Included (Hard Copy Only. Email/Digital Copies Not Accepted)

## SECTION 3 SPONSORING COMPANY MEMBERSHIP INFORMATION

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LAST NAME (OFFICIAL WASA REPRESENTATIVE FOR COMPANY CONTACT) \_\_\_\_\_

FIRST NAME \_\_\_\_\_

COMPANY NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

(\_\_\_\_\_) \_\_\_\_\_  
PHONE NUMBER with AREA CODE

CITY \_\_\_\_\_

STATE \_\_\_\_\_

ZIP/POSTAL CODE \_\_\_\_\_

COUNTRY \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

## SECTION 4 APPLICANT COURSE OF STUDY

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The following choice determines the type of Scholarship for which you are applying:

- PRIMARY- Full Time Study  
 SECONDARY- Part Time Study

### Definition of Primary and Secondary Scholarship

*The Primary Full-Time Scholarship academic qualification includes enrollment verification of 9 or more semester hours or the equivalent as determined by the student's university or college, etc. [NOTE: Full-time applicants will be considered for the Secondary Scholarship if no part-time applicants are available.] The award amount is to be determined by WASA board.*

*The Secondary Part-Time Scholarship academic qualification includes considering Full-Time students not awarded a Primary Scholarship and Part-Time students with enrollment verifications below 9 semester hours or the equivalent as determined by the student's university or college, etc. The award amount is to be determined by WASA board.*



## SECTION 6 PERSONAL STATEMENT

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On a separate sheet, in 350 words or less, please explain why you are deserving of a WASA Scholarship and explain how it will contribute to your success in the future. Also include an explanation of why you need this financial assistance. Suggested topics are goals, needs, family, experiences, and/or dreams.

## SECTION 7 RECOMMENDATIONS

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Please provide one (1) letter of recommendation from non-family members. Recommendations provide character support and should come from teachers, employers, coaches, supervisors, clergy, and professionals.

## SECTION 8 OTHER

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Please also provide the following information in the event that you are selected for the Scholarship:

- W-9 for scholarship distribution(Only required if chosen for scholarship)
- Headshot for promotions
- 1-2 Sentence Quote for promotions

## CHECKLIST

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Confirm that you have included the following in your application:

- Complete Application
- Official Transcript(if applicable)
- Recommendations
- Personal Statement

## ATTENTION

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**I certify that the information provided in this application is complete, accurate and that I have read and agreed to the scholarship criteria.** I authorize the release of all scholarship materials, including references, to members of the WASA Foundation Scholarship Committee. In the event that I am awarded a scholarship, information submitted on this application about me may be released. Failure to be completely truthful in the information provided on this application and future required materials should I be awarded a scholarship, will result in the immediate revocation of any scholarship funds.

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APPLICANT SIGNATURE

DATE

## SUBMISSION INSTRUCTIONS

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Return completed form by mail or email to:

**Mailing Address:**

**Western Access Systems Association**

**360 E 1st Street #605**

**Tustin, CA 92780**

**714-502-9300**

Questions or Concerns, please feel free to call our main office number, 714-502-9300, or email to [scholarship@wasaonline.org](mailto:scholarship@wasaonline.org)

**NOTE: INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.**