

## IFPTE NORMAN L. QUIMBY SCHOLARSHIP

APPLICANT INFORMATION:	
DATE:	
APPLICANT'S NAME:	
LEGAL RESIDENCE: City:	State: Zip: Tel:
RELATIONSHIP TO (Present/Retired/Deceased) IFPTE MEMBER:	
SPONSOR INFORMATION:	
IFPTE MEMBER NAME:	
Year Joined IFPTE: Shipyar	d Code: Shipyard Tel:
ACADEMIC INFORMATION:	
Name of Accepting or Attending School:	
MAJOR FIELD / COURSE OF STUDY (If Known):	
TYPE OF DEGREE (check one) BACHELORS: ASSOCIATES:	
INCLUDE THE FOLLOWING WITH YOUR APPLICATION	ATION:
<ol> <li>Brief Description (approx. 750 words) of Educational Career Objectives and Any Personal Challenges You May Have Encountered</li> </ol>	
2. List of Honors, Awards, Extracurricular Activities, Jobs, and Community Involvement	
<ul><li>3. Letter of Recommendation (preferably from a faculty member)</li><li>4. Most Recent School Transcript</li></ul>	
5. School Acceptance Letter (if not currently en	rolled)
CERTIFICATION:	
" <u>If selected</u> for this scholarship, I agree to	he awarded funds will be used toward my
educational expenses (tuition, fees, book	s, and living expenses)."
(APPLICANT'S SIGNATURE)	(DATE)

NOTE: ALL INFORMATION MUST BE RECEIVED BY THE DUE DATE POSTED TO THE IFPTE LOCAL WEBSITE