Utility and Transportation Contractors Association

APPLICATION FOR 2021

ROBERT A. BRIANT MEMORIAL SCHOLARSHIP

Please complete all sections of this application and have your high school counselor return it to: UTCA, P.O. Box 728, Allenwood, NJ 08720

NAME: _____
Last First Middle

ADDRESS: _____

_____

TELEPHONE: (_____)_____ **EMAIL** *(optional)*: _____

PARENT OR LEGAL GUARDIAN'S NAME: _____

PARENT/GUARDIAN DAYTIME PHONE: (_____)_____ **EMAIL:** _____

Are your parents or guardian employed by or owner(s) of a firm which is a member of Utility and Transportation Contractors Association?

_____ YES _____ NO If yes, name the firm: _____

List below those colleges to which you have applied:

COLLEGE	ADDRESS	ACCEPTANCE RECEIVED

SECONDARY SCHOOLS ATTENDED: **DATE OF GRADUATION**

_____/_____/_____

_____

Please Note:

The $15,000.00 Robert A. Briant Memorial Scholarship will be presented to the **high school senior** who has been judged to have contributed the most to the success of his/her school, fellow students and/or community. Service so that others may benefit is the criteria for consideration by the Scholarship Selection Committee.

Include a description/essay of your activities so that the Scholarship Selection Committee can evaluate your candidacy. **Letters of recommendation should NOT be included in your application package. When you have completed your written description, present this entire application to your high school guidance counselor for verification. Please note that we must receive the completed application package no later than March 15, 2021.**

CANDIDATE'S PRESENTATION

SCHOLARSHIP CANDIDATE**:** _____
Name

If additional space is needed, please make attachments. **You may submit a typed version of your presentation.**

CONFIDENTIAL DATA SHEET

To be completed by the high school guidance counselor:

Name of Student: _____
Last First Middle

Name of Counselor: _____

The student named above is a candidate for the Robert A. Briant Memorial Scholarship. This $15,000.00 scholarship is presented to the **high school senior** who has been judged to have contributed the most to the success of their school, fellow students and/or community. Service so that others may benefit is the criteria for consideration by the Scholarship Selection Committee.

We ask that the high school guidance counselor review the Candidate's Presentation and verify, to the best of the knowledge of the Counselor, that the presentation is authentic. **The Counselor's verification is one of the references the committee utilizes in assessing each candidate. PLEASE INCLUDE A COPY OF APPLICANT'S TRANSCRIPTS.**

***Letters of Recommendation will NOT be considered for this scholarship, and therefore, should not be sent to UTCA.**

I have reviewed the above Candidate's Presentation for the Robert A. Briant Memorial Scholarship. To the best of my knowledge, the presentation accurately describes the activities of the student noted above.

Scheduled High School Graduation: _____/_____/_____
month day year

Counselor Signature: _____ Date: _____

Counselor Phone #: (_____)_____

Thank you for your assistance regarding this scholarship candidate. We appreciate your cooperation in this matter.

Please return Application Package no later than March 15, 2021 to:

Utility and Transportation
Contractors Association

P.O. Box 728

Allenwood, NJ 08720-0728