



## REVEAL YOUR PASSION FOR MANUFACTURING | 2015 SCHOLARSHIP

### DEADLINE

To qualify, please email the following items on the checklist below to:

[wowwdb@wctc.edu](mailto:wowwdb@wctc.edu)

or mail to:

WOW Workforce Development Board  
Attn: Francisco Sanchez  
892 Main Street, Suite A  
Pewaukee, WI 53072

by 4:00 P.M. on September 7, 2015

### REVEAL YOUR PASSION FOR MANUFACTURING SCHOLARSHIP CHECK LIST:

- Application [includes college acceptance letter and/or class schedule, essay, signatures, and use of funds.]
- Recommendation Letter from teacher, counselor, instructor, or other relevant authority familiar with your passion and determination

### PURPOSE

WOW Workforce Development Board (WDB) is seeking applications for its Reveal Your Passion for Manufacturing Scholarship Program. While many individuals dream of obtaining a college degree, obstacles sometimes get in the way – particularly for those dealing with unexpected personal responsibilities. WOW WDB will accept the first 20 applications to award a one-time \$4,000 scholarship to a motivated individual, who has overcome significant obstacles, and is determined to obtain an associate degree in the industrial and manufacturing sector. In turn, you will become a positive role model and will inspire others to follow in your footsteps!

WOW WDB places great emphasis on ambition and determination to succeed rather than just academic record. We reward highly motivated individuals deserving of a second chance to succeed despite personal obstacles and limited resources.

## CRITERIA

To be eligible to apply for the Reveal your Passion for Manufacturing Scholarship Program, you must meet the following criteria:

- are highly motivated and pursuing a career in the industrial and manufacturing sector
- are between the ages of 17 and 24
- reside in Waukesha, Ozaukee, or Washington County
- have a high school diploma or equivalent
- held at minimum a 2.5 GPA in high school
- can demonstrate need for financial assistance
- can provide college acceptance letter and/or class schedule related to an industrial and manufacturing program

## EVALUATION

Applications will be evaluated on your:

- individual determination to succeed
- future goals and plans to achieve them
- ability to communicate the hardships you have overcome or currently face
- self-motivation in completing challenging coursework
- use of funds
- need for financial assistance
- recommendation letter

Applications will be vetted by a committee composed of WOW Workforce Development Board members and staff on September 10, 2015.

## AWARD

The winner will be saluted during the WOW WDB's Annual Dinner on September 23 held at Scenic View Country Club in Slinger, WI. More information on the event will be provided to winner.

## APPLICATION

Thank you for your interest in applying for the Reveal your Passion for Manufacturing Scholarship Program. **Please neatly print or type this application.**

Applications may be submitted via email to [wowwdb@wctc.edu](mailto:wowwdb@wctc.edu) or a hard copy may be submitted at 892 Main Street, Suite A, Pewaukee, WI 53072. **All applications must be received by 4:00pm on Monday, September 7, 2015 to be considered for membership.**

**Please attach the following to this application:**

- A copy of your college acceptance letter and/or class schedule related to an industrial and manufacturing program
- A copy of your recommendation letter from teacher, counselor, instructor, or other relevant authority familiar with your passion and determination

## APPLICANT INFORMATION

Full Name: \_\_\_\_\_ Age: \_\_\_\_\_

Home address: \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Alternate e-mail address: \_\_\_\_\_

High School Name: \_\_\_\_\_ High School GPA: \_\_\_\_\_

College Name: \_\_\_\_\_ Start Date: \_\_\_\_\_

Major/Program: \_\_\_\_\_

Total number of credit hours to be completed: \_\_\_\_\_

## APPLICANT EMPLOYMENT HISTORY (Include 3 most recent jobs, if any.)

Employer 1 Name: \_\_\_\_\_ Wage: \_\_\_\_\_

Employer 2 Name: \_\_\_\_\_ Wage: \_\_\_\_\_

Employer 3 Name: \_\_\_\_\_ Wage: \_\_\_\_\_

## FAMILY INFORMATION

Parent's Full Names: \_\_\_\_\_

Parent's Address(es): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Parent's Phone Numbers: \_\_\_\_\_

Parent's Monthly Income: Father \_\_\_\_\_ Mother \_\_\_\_\_

## FINANCIAL ASSISTANCE INFORMATION

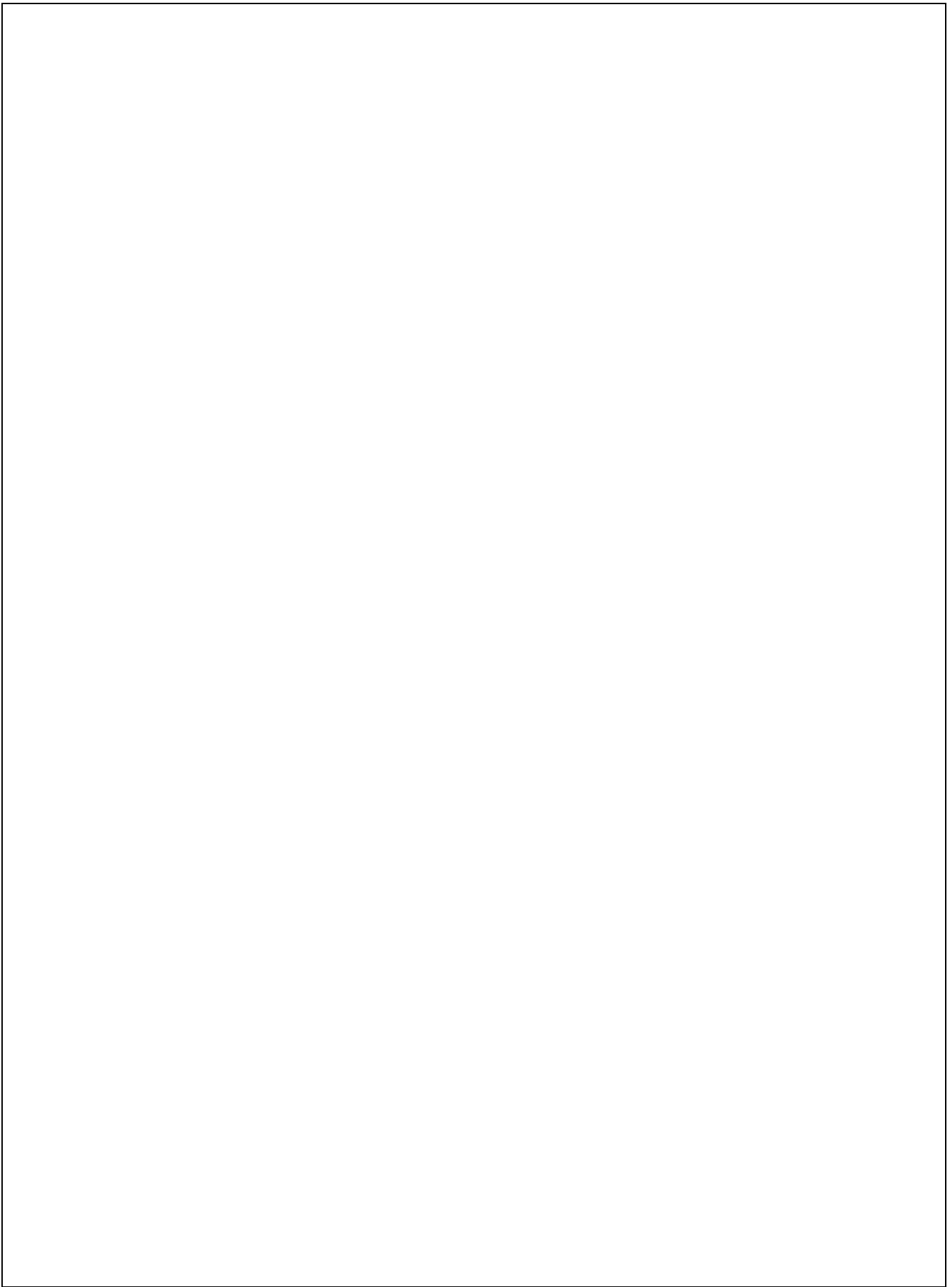
**Are you or your family eligible or currently receiving any of the following assistance programs?**

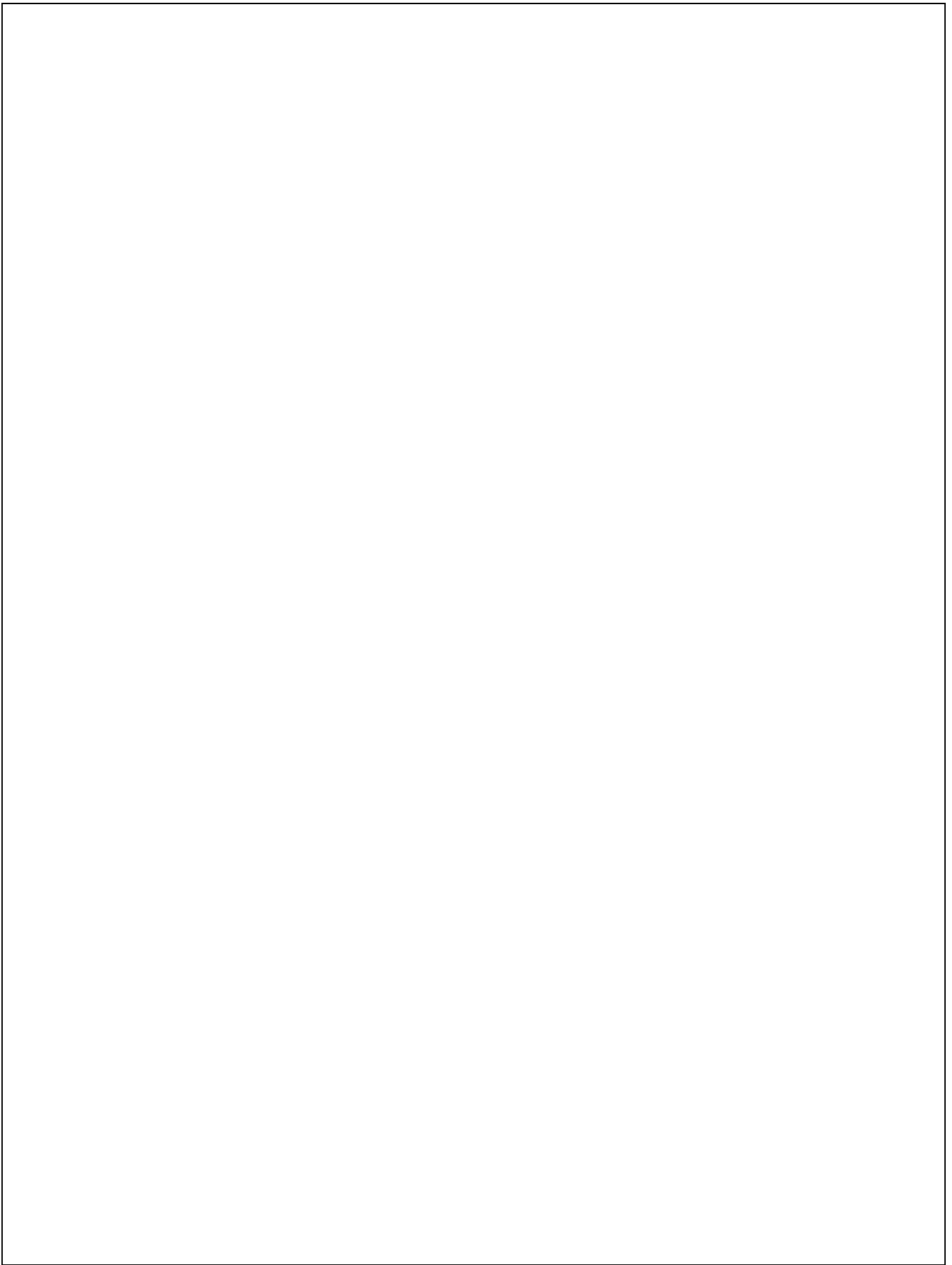
- Free or Reduced Cost Lunch Program:  Yes  No
- Food Stamps/EBT or other food assistance program:  Yes  No
- Special Supplemental Nutrition Program for Women, Infants, and Children (WIC):  Yes  No
- Temporary Assistance to Needy Families (TANF):  Yes  No
- Low Income Home Energy Assistance Program or other utility assistance programs:  Yes  No
- Supplemental Security Income (SSI):  Yes  No
- Reduced Housing/Housing Assistance:  Yes  No
- State or Federal Health Insurance (example: BadgerCare, Marketplace):  Yes  No

## APPLICANT ESSAY

**In the following space, please answer the following questions in an essay format. Maximum of 2 pages allowed using Arial Font and Size 11.**

- What inspired you to apply for this scholarship: Reveal your Passion for Manufacturing?
- Describe your most meaningful achievement to date and how it has influenced your life.
- What personal or family financial hardships have you had to overcome to be the person you are today? State any special personal or family circumstances to explain your financial need.
- Describe the most significant challenges you may face transitioning to and while in college and what steps you may take to address those challenges to succeed.
- What do you want to use your education to achieve? What are your goals after you graduate from college?
- What would you use the \$4,000 scholarship towards?





## SIGNATURE

By submitting this application, I hereby verify that the information included in this application is accurate to the best of my knowledge.

Applicant Full Name: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date \_\_\_\_\_

**If under age 18, parent consent is also required.**

I give approval for the above name to participate in the Reveal Your Passion for Manufacturing Scholarship Program.

Parent Full Name: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date \_\_\_\_\_