ALABAMA MUNICIPAL ELECTRIC AUTHORITY



Technical School Scholarship Program

Power That Works For You!®

SCHOLARSHIP SUBMISSION REQUIREMENTS

The Alabama Municipal Electric Authority (AMEA) Scholarship Program offers a \$2,500 technical school scholarship on behalf of its Member cities: Alexander City, Dothan, Fairhope, Lanett, LaFayette, Luverne, Opelika, Piedmont, Riviera Utilities, Sylacauga and Tuskegee.

To be eligible for this scholarship, you must meet the following requirements:

- 1. The student's parents or guardian must be a customer of an AMEA Member City electric department.
- 2. The student must attend a college or university within the state of Alabama.
- 3. The student must be a graduating high school senior.

DIRECTIONS/(CHECKLIST):

 All sections of the application completed.
 Two letters of recommendation are required
1. One letter from a guidance
counselor or teacher
2. One letter from someone in the
community you know personally
An official transcript from your guidance
counselor. Note: Application will not be
considered without official transcript.

RETURN TO:

Scholarship Application Alabama Municipal Electric Authority P.O. Box 5220 Montgomery, AL 36103-5220

The deadline is the first Monday in February. <u>All</u> applications must be postmarked no later than that day to be eligible for consideration.

JUDGING:

All applications will be judged based on grades, financial need, community involvement and work experience.

The top five will then be reviewed, and winners will be selected, by an independent panel of Montgomery area college guidance personnel.

Winners and non-winners of the scholarships will be notified by mail in mid-April.



Incomplete or late applications will not be considered.



TECHNICAL SCHOOL SCHO

Power That Works For You!®

Alabama Municipal Electric Authority • P. O. Box 5220 • Montgomery, AL 36103-5220

Applicant's Name:(First)	(MI)	(Last)
Applicant's Daytime Phone No.:		
Address:		
	(Street)	
(City)	(State)	(Zip)
Email Address:		
Parent or Guardian receives electric pow	er from:	
Name on Electric Account and Account N		
Name of High Cahool from which		nly for customer verification purposes)
Name of High School from which you wi	n graduate:	
Counselor's Name:		
Counselor's Email Address:		
Name and mailing address of accredited a student in the fall of this year.	ALABAMA school you	ı plan to attend as a full-time
What type of technical trade program wi Welding Cosmetology Automotive Manufact		•
band, student council, newspaper/yearbo		fices held.
band, student council, newspaper/yearbo		fices held.
List all school-related activities during Soband, student council, newspaper/yearbo Activity		fices held.

LARSHIP PROGRAM APPLICATION

Honor		Date
List church, synagogue, and community Y-Teens, Key Club, theater. List awards		ude Boy/Girl Scouts, choir,
Activity		Rank/Office, etc.
List any activities, awards, recognitions, categories.	, service projects, etc., t	hat do not fit into the above
List jobs in which you received income. baby sitting.)	Begin with most curren	nt. (May include lawn work/
Employer		Dates
	From:	To:
	From:	To:

Please remember to attach letters and official transcript.

Family Financial Profile

For Use in Establishing Financial Need

Applicant's Name:	
Number of Family Members <u>Living At Home</u> : (For white INCLUDE SIS/BROS IN COLLEGE	hom parents are financially responsible)
Father:	Mother:
Sis/Bros:	Age Age
	Age Age
Father's Employer:	Address:
Mother's Employer:	Address:
Applicant's Employer:	Address:
List here Income from: Child Support	Disability Income
Soc. Security	Aid to Depend. Child.
	Combined Family Income eck applicable category.
Less Than \$19,999 \$60,000 - 69,999 \$20,000 - 29,999 \$70,000 - 79,999 \$30,000 - 39,999 \$80,000 - 89,999 \$40,000 - 49,999 \$90,000 - 99,999 \$50,000 - 59,999 \$100,000 - 109,999	\$110,000 - 119,999 \$160,000 - 169,999 \$120,000 - 129,999 \$170,000 & Over \$130,000 - 139,999 \$140,000 - 149,999 \$
List and describe any impact on family finances due to:	
Serious/Chronic Health Problems: Who	Problem
Who	Problem
Financial responsibility for person(s) other than above listed fa	mily members (i.e. grandparents).
Person	Relationship
Person	Relationship
Financial impact of this responsibility in previous 12 months. S Anticipated impact of this responsibility during next 12 months	
Is family home: Owned Monthly Pmt. \$	Rented Monthly Pmt. \$
Are there other financial considerations? Explain below:	
	rents, of sibling's expenses during the school year beginning next fall? \$
I submit that all information contained in this appl	lication and its attachments is true and correct.
Applicant	Parent/Guardian