

SCHOLARSHIP APPLICATION
HOME BUILDERS ASSOCIATION OF CENTRAL MISSOURI
1420 CREEK TRAIL
JEFFERSON CITY, MO 65109
rachel@hbcentralmo.com

NAME OF APPLICANT: _____

ADDRESS: _____

PHONE NUMBER: _____

DATE OF BIRTH _____

PARENTS NAME _____

GPA: _____

HIGH SCHOOL ATTENDING & EXPECTED DATE OF GRADUATION:

SCHOOL OF CHOICE & ENROLLMENT DATE AND MAJOR COURSE OF STUDY

State Technical College _____

State Fair Community College _____

Other: _____

DO YOU KNOW A MEMBER OF HBA OF Central MO? _____
(Please visit our website at www.hbcentralmo.com click on the membership directory to view the list of HBA members)

IF ANSWER IS YES, PLEASE LIST NAME OF MEMBER & RELATIONSHIP

PLEASE ANSWER THE FOLLOWING QUESTIONS AND ATTACH TO THIS APPLICATION.

WHY ARE YOU INTERESTED IN CHOOSING THE BUILDING INDUSTRY AS YOUR CAREER CHOICE?

IN WHAT CLUBS, ORGANIZATIONS AND ACTIVITIES (SCHOOL AND COMMUNITY) HAVE YOU PARTICIPATED IN DURING HIGH SCHOOL?

LIST PREVIOUS JOBS AND EMPLOYERS.

WRITE A STATEMENT CONCERNING YOUR FINANCIAL SITUATION.

ATTACH ANY LETTERS OF RECOMMENDATIONS AND STATE ANY OTHER FACTORS WHICH YOU FEEL ARE IMPORTANT FOR THE SCHOLARSHIP COMMITTEE TO KNOW WHEN MAKING A DECISION IN THE AWARDING OF THIS SCHOLARSHIP.

PLEASE SUBMIT PICTURE FOR PRESS RELEASE INFORMATION-WILL BE RETURNED TO YOU

ALL INFORMATION SUBMITTED WILL BE HELD STRICTLY CONFIDENTIAL

Signature of Applicant

Signature of Parent or Guardian

Date _____

Complete this application and return by April 1, 2020 to:

HBA OF CENTRAL MO Scholarship Committee
1420 Creek Trail
Jefferson City, MO 65109