

Tom Cory Scholarship

325 John Knox Rd. , L-103 Tallahassee, Florida 32303 Phone: 850.205.5637 - Email: info@archprecast.org

Thank you for your interest in the Architectural Precast Association's Tom Cory Scholarship. The Scholarship is \$2,000. Please review the information below for Scholarship requirements and directions on submitting your application. All entries must be received by **June 14, 2024**. The APA Educational Foundation Board of Directors will review applications and the scholarship winner will be notified by July 31, 2024.

1. EDUCATION REQUIREMENTS

- 1. Must be a college junior, senior or graduate student with a cumulative G.P.A. of 3.0 or higher. Must maintain a 3.0 G.P.A. during scholarship period.
- 2. Must continue education in pursuit of an architectural degree (architect, landscape, or architectural engineering).
- 3. Must have at least two semesters of school left to complete from date of award. Both Undergraduate and Graduate levels are acceptable.
- 4. Must be involved in activities related to their field.

2. ENTRY MATERIAL REQUIREMENTS

- 1. Scholarship Application (below).
- 2. A transcript of two years college through the last grading period prior to the date of application.
- 3. A typed essay containing the following three sections:
 - a.) Your post-graduation career plans (100 words max)
 - b.) Why you chose your future career path (300 words max)
 - c.) A topic of your choice related to precast concrete (300 words max)
- 4. A letter of recommendation from a faculty member of your College or University.

3. SUBMISSION REQUIREMENTS

All Scholarship Entry Materials should be submitted in a single PDF file by email

The file should be named in the following manner: Last Name, First Name.

Please place entry materials within the PDF file in the following order:

- 1. Application
- 2. Transcript
- 3. Typed Essay
- 4. Resume (if applicable)
- 5. Letter of Recommendation

Please read the instructions carefully. Entries submitted incorrectly will not be considered

For questions regarding this application or the Tom Cory Scholarship, please refer to our FAQ page. If you still need additional clarification, please contact the APA office at info@archprecast.org.



Tom Cory Scholarship

325 John Knox Rd. , L-103 Tallahassee, Florida 32303 Phone: 850.205.5637 - Email: info@archprecast.org

Please fill out all underlined areas provided and select the appropriate responses by using the check boxes. If a question does not apply, write N/A in the space provided.

1. PERSONAL INFORMATION
Full Name:
Student ID Number:
Date of Birth:
Mailing Address:
Email Address:
City:State/Province:Zip/Postal Code:
Phone:
Name of Parent(s) or Guardian(s):
Name of Sponsoring APA Member (if applicable):
Company Name: Address:
City: State/Province: Zip/Postal Code:
Phone:
Year of High School Graduation:
2. SCHOOL INFORMATION
Current School:
Name:
Address:
City: State/Province: Zip/Postal Code:
Phone:
When do you expect to graduate? Course of Study:

If changing schools for the upcoming academic year, please complete the information below for the school in which you intend to enroll or are already enrolled in:

Name:
Address:
City: State/Province: Zip/Postal Code:
Phone:
Have you been accepted? (Click) Yes
No
When do you expect to graduate?
Course of Study:
3. EXTRA CURRICULAR COMMUNITY INFORMATION
List honors, awards, prizes or distinctions you have received:
List school activities, including sports, that you participated in and any offices you have held:
Describe social activities you have participated in and any office you have held:
Describe social activities you have participated in and any office you have field.
List and describe your hobbies and other interests:
4. WORK EXPERIENCE
List your work experience:
(Attach resume, if applicable)
Click here if you do not wish to grant permission to the APA Educational Foundation to publish your essay in any publication.
5. JOB INTEREST
Would you be interested in working for a Precast Concrete Manufacturer if a job was available? (Click the appropriate box)
 Yes Part-time Summer
I certify that the information on this application is complete and accurate to the best of my knowledge and belief. (Please type in name and date to confirm)
Signature: Date:

Please submit applications electronically to: info@archprecast.org