



TEXAS ASSOCIATION OF STRUCTURAL MOVERS

2202 S. 51st Street, Temple, TX 76504 O: (512)850-0365 F: (254)613-9099

Scholarship Application Announcement

If you are interested in applying for a T.A.S.M. Scholarship, please contact the T.A.S.M. office at 512-850-0365 to request an application. Or, you can download a copy from the TASM website www.texashousemovers.com.

under website topic header Convention/Scholarship.

Who Can Apply?

Company owners, and or their children, can apply if the company has been engaged actively in the house moving industry and a member of the T.A.S.M. for a minimum of one year.

Company employees, and or their children, can apply if the employee has been employed for a, minimum of two years or a letter of recommendation from their employer.



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T.A.S.M. 2020 SCHOLARSHIP APPLICATION

TO THE STUDENT

Filling out this scholarship application will not automatically guarantee that you will receive a scholarship. We encourage you to apply for all financial aid opportunities available through other sources.

Please fill out the application carefully and completely. An incomplete application will not be presented to the committee.

PROCEDURES FOR APPLICATION

- Applications will only be taken by mail.
- Applicants must send the following:
 - Completed application
 - Photo of self (4" x 6" or 5" x 7")
 - Copy of transcripts (high school & college, if applicable) or current report card letter(s) of recommendation
 - Essay -200 to 400 words (may be handwritten) and must include the following topics:
 - Reason for applying for this scholarship
 - Citizenship, leadership and community involvement
 - Future plans, hopes and ambitions
 - How and why a person/event made an impact on you
 - Your signature must conclude the essay
- **Application must be postmarked by December 15th, 2019.**
- All transcripts and mailing fees are the responsibility of the applicant.
- The Scholarship Committee will make their decisions based on academic achievement, recommendations and essay.
- **Mail application and Information to:**

Texas Association of Structural Movers
ATTN: Scholarship Chairman
2202 S. 51st Street
Temple, TX 76504

T.A.S.M. SCHOLARSHIP APPLICATION

PERSONAL INFORMATION

Name: _____ SS#: _____

Address: _____ City/State/Zip: _____

Email: _____ DOB: _____ Age: _____

Phone : Home (____) _____ Work (____) _____ Cell: (____) _____

Company Affiliate: _____

Relationship with Company: _____

FAMILY INFORMATION

FATHER

Name: _____ Marital Status : _____

Address: _____ City/State/Zip: _____

Email: _____ DOB: _____ Age: _____

Phone: Home (____) _____ Work (____) _____

Employer: _____ Date Started: _____

Address: _____

_____ Years w/TASM: _____

MOTHER

Name: _____ Marital Status : _____

Address: _____ City/State/Zip: _____

Email: _____ DOB: _____ Age: _____

Phone: Home (____) _____ Work (____) _____

Employer: _____ Date Started: _____

Address: _____

_____ Years w/TASM: _____

Q: Number of family dependents not including applicant or parents and their ages:

Q: Who will be responsible for financing your education? : _____

Q: Number of family members attending college or trade school next year: _____

EDUCATIONAL INFORMATION

Which College, University, or Technical School do you wish to attend?

1st Choice: _____

Name City State Zip

2nd Choice:

Name City State Zip

Your intended major or field of study: _____

Your goals for education: _____

List school & community activities & awards (use additional sheets as needed)

Activities: # of years Awards and / or offices held

EMPLOYMENT INFORMATION

Dates to & from Employer Job Description

Comments or additional information that you feel will help the committee reach a decision (any unusual circumstances concerning your family or facts about your education)

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We understand that this is only a scholarship application and that the Texas Association of Structural Movers does not make any representations or assurances regarding the availability of scholarships.

All information submitted will be held in strict confidence and will not be released to unauthorized individuals unless specified by the applicant.

ANY FALSE STATEMENTS OR OMISSIONS OF PERTINENT INFORMATION ON THIS APPLICATION WILL BE CONSIDERED JUST CAUSE FOR THE REMOVAL OF THE APPLICATION FROM THE LIST OF APPLICATIONS CONSIDERED FOR SCHOLARSHIP.

Student's signature (required)

Parent's signature (required)

Date:

Date: