

Land Surveyors' Association of Washington Foundation

2020 Scholarship Application



SECTION 1 – PERSONAL DATA

Last Name		First		M.I.	Date
Current Street Address				Apartment/Unit #	
City		State		ZIP	
Phone 1		E-mail Address			
Phone 2		Age		Marital Status	
Permanent Street Address				Apartment/Unit#	
City		State, County			Zip
LSAW Member (circle one)? Yes No Chapter?				Number of Dependents	
I am currently enrolled in the (college name)				Surveying program	
Program of Study or Major				Credit hours completed	
I am applying for these scholarships: LSAW Foundation <input type="checkbox"/> , Mike Mickiewicz Memorial <input type="checkbox"/> , North Olympic Surveyors Memorial <input type="checkbox"/> , John Thomas Memorial <input type="checkbox"/> , John Thalaker Memorial <input type="checkbox"/>					

SECTION 2 – EDUCATIONAL HISTORY (Attach additional sheets if necessary)

High School		Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
College		Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Other		Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree

SECTION 3 – EMPLOYMENT HISTORY (Attach additional sheets if necessary)

Company 1		Address			
Type of Business		Position			
Supervisor		From		To	
Company 2		Address			
Type of Business		Position			
Supervisor		From		To	
Company 3		Address			
Type of Business		Position			
Supervisor		From		To	

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge. If this application leads to a scholarship award, I understand that false or misleading information in my application packet may result in revocation of and/or repayment of my award.

Signature _____ Date _____