| *Application* |
|---|

## Utah College of Applied Technology
## Utah NASA Space Grant Consortium

# SCHOLARSHIP '18

*Up to $1,500 in scholarship funds are available to be assigned*
*as a one-time scholarship award with matching dollar BATC tuition waiver*
*Scholarship dollars may be used to pay for tuition & fees and/or BATC bookstore purchases*
*required for successful completion of student's program or may be released as a housing stipend*
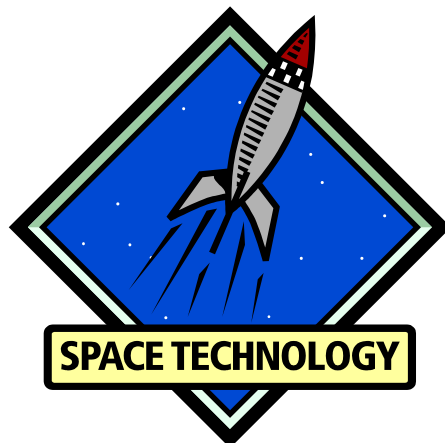
## Eligibility Requirements

- Currently enrolled in a BATC certificate program supportive of or related to aerospace; students who have completed 50% or more of program will be given preference
- Recipient(s) may be selected on the basis of both merit and need; selection of women and minorities is particularly encouraged
- Must maintain satisfactory progress and attendance
- Must maintain a minimum enrollment of 15 hours per week
- Must certify lawful presence in the US
- Once funds are used and again upon completion of program or training, each recipient must provide a written follow up report to the BATC financial aid office summarizing use of scholarship funds, accomplishments and plans

# Deadline:  September 6, 2017
# November 8, 2017

*Applications may be evaluated following each deadline date. Multiple recipients may be selected.*
*Limited to availability of funds, this scholarship may terminate at any time without notice.*

## For more information

BATC Financial Aid Office
1301 North 600 West
Logan, Utah 84321
(435) 750-3204 or (435) 750-3114 or (435) 750-3279
Toll Free (866) 701-1100

SPACE TECHNOLOGY

# *Application*

## Section 1:  Personal Information

Name: _____  Phone Number:  (     ) _____

Address: _____
           *Street*                               *Apt #*          *City*                   *State*        *Zip*

Student ID Number: _____ Email Address: _____

BATC Program: _____  Campus:  ☐ Logan  ☐ Brigham City

☐ I am currently enrolled in the above training program. I began training _____ *(date).*

☐ I expect to complete training in the above program _____ *(date).*

AND
☐ I am a US Citizen or I am lawfully present in the US.

## Section 2:  Statements

On separate sheet of paper, provide the following:

- Your education and career goals
- Describe how your program is supportive of or related to the aerospace industry
- Describe your awareness of and interest in your programs relationship to the aerospace industry and how your training and career goals may continue to be supportive of the aerospace industry
- If applicable, a statement regarding your status as a woman or minority student
- Describe your current household financial situation, why this award would be helpful to you, and how you would like to see the funds used
- Provide a list of other scholarships, grants, sponsorships, etc. you are receiving for your education and describe how these sources are being used to meet your educational costs

## Section 3:  Satisfactory Progress

Include with your application the attached <u>Scholarship Progress Form</u>, completed and signed by the department head or supervising teacher of your training program at BATC.

## Section 4:  Letter(s) of Support

Provide at least one letter from someone outside of your family who can support all of your statements (See Section 2) and who can recommend you as one whose merit or need should be considered for this scholarship. Support outside of your family may include your employer, a member of clergy, an instructor, etc… NOTE:  If providing only one Letter of Support, this letter should not be from the instructor who fills out the attached "Scholarship Progress Form"

## Section 5:  Recipient Agreement and Follow-up Reports

**Read the following agreement, sign and date below.**
I understand the terms of this scholarship and acknowledge that everything reported herein is true and accurate information. If selected as a recipient of the Utah College of Applied Technology - Utah NASA Space Grant Consortium Scholarship, upon use of scholarship funds, I agree and commit to provide a written follow up report summarizing my use of scholarship funds and my program accomplishments to that point.  Upon completion/withdrawal from my program, I agree and commit to provide an additional written follow-up report summarizing my program accomplishments and employment plans.  I will provide my follow-up reports to the Financial Aid Office at Bridgerland Applied Technology College within one week following the use of funds and within one week of my completion or withdrawal from the program, respectively. *I understand both follow up reports should be provided to the Financial Aid Office without request and that use of any resume-style report is acceptable.*

I understand these reports may be submitted by BATC to the Utah NASA Space Grant Consortium through the Utah College of Applied Technology.

_____
*Applicant Signature                                Date*

## Section 6:  Documentation of Completed Competencies and Tuition Charges

▫ Attach documentation **in hours** of the competencies you have completed. If you are unable to access this from your student portal, an academic transcript or documentation from your instructor is acceptable.
▫ Attach a print out of tuition charges you have accrued as of the date of this application deadline. You may obtain this printout from your my.batc.edu student portal or from registration.

# Deadline:   Wednesday, September 6, 2017
# Wednesday, November 8, 2017

Complete application packet must be received at **Bridgerland Applied Technology College**
**Financial Aid Office**
**1301 North 600 West**
**Logan, UT 84321**

# BRIDGERLAND APPLIED TECHNOLOGY COLLEGE
# Scholarship Progress Form

Student Name _____Program _____

Indicate number of months report includes: _____ **Evaluate student's entire time in your program.**

**Attendance:**
- ❑ Satisfactory
- ❑ Needs Improvement
- ❑ Unsatisfactory

**Progress:**
- ❑ Accelerated    ❑ Slow
- ❑ Average        ❑ None

**Cooperation:**
- ❑ Cooperative
- ❑ Not Cooperative
- ❑ Not Interested

**Quality of Work:**
- ❑ Excellent    ❑ Fair
- ❑ Good         ❑ Poor

**Problem Areas:**
- ❑ Learning of subject matter
- ❑ Following instructions
- ❑ Handling tools/machines
- ❑ Speed
- ❑ Accuracy
- ❑ Disability/Health
- ❑ Prosthesis/Appliance
- ❑ Personal Grooming
- ❑ Social Skills
- ❑ Other _____

**Comments and/or Recommendations:**

_____

_____

_____

_____

_____

**Does this student have the capacity to succeed in this kind of work?**

❑ Yes ❑ No, because: _____

**Student's anticipated completion date:** _____

**Instructor Name (please print clearly):** _____

**Instructor Signature:** _____    Date: _____