



ANGA

Alabama Natural Gas Association

**EDUCATION
SCHOLARSHIP
PROGRAM AND
APPLICATION**

Alabama Natural Gas Association

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The Alabama Natural Gas Association (ANGA) has established an Education Scholarship Program. This program has been established to offer assistance to academically qualified individuals who intend to pursue a degree at a two or four-year accredited university, college or technical school. Scholarships will be based on such criteria as academic achievement, financial need, extra-curricular activities, community involvement, etc. This fund has been established by the direct efforts of the ANGA Board of Directors and from monies raised by, or from donations or contributions made to ANGA.

SCHOLARSHIPS

- Four scholarships will be awarded annually in the amount of \$1,500.00 each with the check written out jointly to the scholarship recipient and the educational institution they attend. These checks will require the endorsement of both parties.
- Each year, the ANGA Scholarship Committee shall consist of the three (3) most immediate past presidents of the association with the most recent past president serving as the chairperson of the committee.
- The scholarships will be awarded at the discretion of the ANGA Scholarship Committee.
- The scholarship levels to be awarded may be adjusted annually at the discretion of the ANGA Board of Directors. Scholarships will be awarded at the ANGA Annual Conference.

ELIGIBILITY

To be considered for the ANGA Education Scholarship, the applicant:

- Must be a dependent child of **a natural gas distribution or pipeline system** employee who has been continuously employed for at least one year with that system, where that system is a multiple distribution utility, and the employee **works for the natural gas division of that system**. The distribution system must be located within the state of Alabama and be a member in good standing with ANGA. Also, **the employee and dependent child must reside within the state of Alabama to be eligible** or;
- Must be a dependent child of **an affiliate member** company employee who has been continuously employed for at least one year with that company. The company must be a member in good standing with ANGA. Also, the **employee and dependent child must reside in the state of Alabama to be eligible**.
- Must be a graduating high school senior or currently an enrolled university, college or technical school student, with a minimum grade point average of 2.5, or have completed the GED prior to the year applying and must meet the other eligibility requirements.
- Must be accepted as a full-time student at an accredited university, college or technical school **located within the state of Alabama**.
- **Must complete pages 3-5 of the ANGA Education Scholarship application and submit prior to March 15th of a given year.**

In addition to the above criteria, to be considered for an additional scholarship for the next yearly term, the student:

- Must maintain a 2.5 grade point average.
- Must be classified as a full-time student (minimum of 12 credit hours per semester).

PLEASE NOTE: Complete applications submitted to ANGA by the March 15th deadline will be given every consideration by the Scholarship Committee, but please be advised that submitting an application does not automatically guarantee you will receive a scholarship. The Scholarship Committee reserves the right to determine, based on the criteria outlined, who each year's recipient(s) will be.

2019 Scholarship Application
Application Deadline is March 15th
APPLICATIONS POST MARKED AFTER MARCH 15TH WILL BE INELIGIBLE AS WILL
INCOMPLETE APPLICATIONS

Name _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____ Email _____

County _____ Date of Birth _____

High School/College/University/Tech School _____

School Address _____

(Include Street, City, State, Zip)

Principal or Guidance Counselor & Phone Number _____

FAMILY INFORMATION

IMPORTANT: One Parent or Guardian must meet ELIGIBILITY REQUIREMENTS on page 2.

Father or Guardian

Mother or Guardian

Name _____

Email _____

Employer _____

Title _____

Please fill in current information about yourself and any siblings in your family in the space provided below. Also, if any other individual in your household will attend college in 2019-20, list the college.

	Full Name	Age	Relationship to Student	College
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____

If there are additional family members not listed above, please attach a separate list.

EDUCATIONAL PLANS

Intended College, University or Technical School _____

Intended Major _____ Term to be enrolled _____

What are your plans to continue your education? _____

What are your career goals? _____

ACTIVITIES

List any extra-curricular activities at school in which you have participated or honors you have received.

List any involvement in community/civic activities and/or work experience.

GENERAL

State briefly what it would mean to you to be awarded a scholarship (attach additional page if necessary).

FINANCIAL INFORMATION

Please check appropriately for combined family income (including both parents/guardians).

_____ \$0-59,999 _____ \$60,000-99,999 _____ over \$100,000

List any other financial assistance for which you have applied or plan to apply.

SIGNATURE AND CERTIFICATION

I certify that none of the information provided on this application is false nor have I willingly withheld any pertinent information. I will use scholarship funds for educational purposes only. I give permission for information to be given to the appropriate committee so that they may recommend eligible recipients.

Signature of Applicant _____ Date _____

ACADEMIC INFORMATION SECTION

NOTE: All students must have this section completed by their high school guidance counselor or college/university/tech school academic advisor and returned with their application. ACT scores are included in the evaluation process and must be provided below. Failure to provide all of the information requested below may cause your application to be rejected.

Please complete the application and submit to your counselor/advisor who will then complete this section and forward to ANGA Scholarship Program.

(Please print clearly.)

I certify that _____ is ranked _____ out of a class of _____, and has a GPA of _____ at _____ (high school or college/university/tech school).

ACT Scores: _____
 ENGL MATH READ SCIEN COMP

A copy of the student's most recent transcript/semester grades must be included with this application.

Recommendation (If explanation is needed, please include in a separate letter.)

_____ Highly Recommend _____ Recommend _____ Not Recommend

Signature

Printed Name

Title

Date

Please mail or fax the completed scholarship application to:

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