

2012 PSAI SCHOLARSHIP PROGRAM

PSAI SCHOLARSHIP CRITERIA:

- **PSAI Member company employee or the child / spouse of a full time employee**
- **High School Senior or College undergraduate enrolled full-time at a four year or two year college or vocational / technical school**
- **Full-time employee with part time student status requires 6 semester hours**
- **GPA 3.0 or above (provide copy of transcript)**
- **Minimum SAT Score 1000 or ACT 21 (or country equivalent)**
- **Employee must be employed by PSAI Member company for a minimum of two (2) years**
- **Submit 500 to 1000 word essay on the importance and value of portable sanitation**
- **Application and essay must be sent to Scholarship Management Services**
- **Submit Application no later than March 15, 2012 to:**

PSAI Scholarship Program
Scholarship Management Services
One Scholarship Way
St. Peter, MN 56082 USA

Please Direct All Questions to Scholarship America
The 2011 PSAI Scholarship Application can be
downloaded at www.pesai.org

Sending a resumé does not replace any part of this application. If space provided in any section is inadequate, you may continue on additional sheets. Attachments must follow the same format. DO NOT repeat information already reported on the application form. Your name, address and name of this scholarship program should be included on all attachments.

WORK EXPERIENCE

Describe your work experience during the **past four years**. Indicate dates of employment for each job and approximate number of hours worked each week.

Employer/Position	From - Mo/Yr	To - Mo/Yr	Hours per Week	Were you paid for your work?
				YES / NO
				YES / NO
				YES / NO
				YES / NO

ACTIVITIES, AWARDS AND HONORS

List all extracurricular activities (in and outside of school) in which you have participated during the **past four years** (e.g., student government, music, sports, volunteer work, scouts, etc.). Indicate all special awards, honors and offices held. **Separate high school/secondary school activities from college/postsecondary activities.**

Activity	No. of Years Partic.	Special Awards, Honors	Offices Held	Activity	No. of Years Partic.	Special Awards, Honors	Offices Held

GOALS AND ASPIRATIONS

Make a brief statement or summary of your plans as they relate to your educational and career objectives and long-term goals.

UNUSUAL CIRCUMSTANCES

Please describe how and when any unusual family or personal circumstances have affected your achievement in school, work experience, or your participation in school and community activities.

NON-U.S. APPLICANTS ONLY: ACADEMIC AND SCHOOL COST INFORMATION (REQUIRED)

A. Provide clear photocopies of the following educational documents from the past four years:

1. Transcript of grades (academic record)
2. Secondary school credential/diploma/certificate if earned, and
3. Results of examinations.

English translations must be provided for all non-English documents.

B. Provide itemized school costs for one academic year for the school you plan to attend:

<u>Local Currency</u>	<u>U.S. Equivalent</u>
Tuition:	\$
Fees:	\$
Books:	\$
Transportation:	\$
Room:	\$
Board (estimate if living at home):	\$
TOTAL:	\$
Government subsidy:	\$

APPLICANT APPRAISAL (REQUIRED)

To the Applicant: This section is required and must be completed in the format provided. If incomplete, your application will not be evaluated. The section is to be completed by a secondary school headmaster, high school or college counselor or advisor, an instructor, or a work supervisor who knows you well.

To the Adult Appraiser: You have been asked to provide information in support of this application. Please give immediate and serious attention to the following statements. When complete, please return to applicant. If you prefer, photocopy this section and return to applicant in a sealed envelope. A letter of recommendation does not replace this section.

The applicant's choice of a postsecondary educational program is	<input type="checkbox"/> extremely appropriate	<input type="checkbox"/> very appropriate	<input type="checkbox"/> moderately appropriate	<input type="checkbox"/> inappropriate
The applicant's achievements reflect his/her ability	<input type="checkbox"/> extremely well	<input type="checkbox"/> very well	<input type="checkbox"/> moderately well	<input type="checkbox"/> not well
The applicant's ability to set realistic and attainable goals is	<input type="checkbox"/> excellent	<input type="checkbox"/> good	<input type="checkbox"/> fair	<input type="checkbox"/> poor
The quality of the applicant's commitment to school and/or community is	<input type="checkbox"/> excellent	<input type="checkbox"/> good	<input type="checkbox"/> fair	<input type="checkbox"/> poor
The applicant is able to seek, find, and use learning resources	<input type="checkbox"/> extremely well	<input type="checkbox"/> very well	<input type="checkbox"/> moderately well	<input type="checkbox"/> not well
The applicant demonstrates curiosity and initiative	<input type="checkbox"/> extremely well	<input type="checkbox"/> very well	<input type="checkbox"/> moderately well	<input type="checkbox"/> not well
The applicant demonstrates good problem-solving skills, follows through, and completes tasks	<input type="checkbox"/> extremely well	<input type="checkbox"/> very well	<input type="checkbox"/> moderately well	<input type="checkbox"/> not well
The applicant's respect for self and others is	<input type="checkbox"/> excellent	<input type="checkbox"/> good	<input type="checkbox"/> fair	<input type="checkbox"/> poor

Comments: _____

Appraiser's Name _____ Title _____ Telephone (_____) _____

Signature _____ Date _____

Appraiser's Business Address: Street _____ City _____ State/Province _____ ZIP/Postal Code _____ Country _____

U.S. APPLICANTS ONLY: ACADEMIC INFORMATION (REQUIRED)

A complete transcript of grades **must** be sent with this application. Grade reports are not acceptable.

- 1. Students currently or previously enrolled in college or vocational-technical school must** include all college or vo-tech transcripts of grades from each school attended. Online transcripts must display student name, school name, grade and credit hours earned for each course, and term in which each course was taken. (Completion of high school information below is not necessary.)
- 2. High school seniors and students who have completed less than one full quarter or semester of postsecondary education must** include a high school transcript of grades and have this section completed by the appropriate school official. **(A clear explanation of the high school's grading scale must also be submitted.)**

Applicant ranks _____ in a class of _____	Cumulative Grade Point Average	SAT (U.S. only)			ACT (U.S. only)				
	Weighted: _____/4.0 scale	Critical Reading	Math	Writing	English	Math	Reading	Science	Composite
	Unweighted: _____/4.0 scale								

School Official's Signature _____ Date _____ Title _____ Telephone (_____) _____

School Official's Address: Street _____ City _____ State _____ ZIP Code _____

APPLICATION CHECKLIST

The student is responsible for submitting all materials to Scholarship Management Services on time. Incomplete applications will not be evaluated. This application becomes complete and valid only when all of the following materials have been received:

- Student Application with completed Applicant Appraisal - (in English)
- Current Complete Transcript(s) of Grades (academic record) and other required documents
- English translations for all non-English documents

All materials, including transcript, must be addressed to:

PSAI Scholarship Program
Scholarship Management Services
One Scholarship Way
Saint Peter, MN 56082 U.S.A.

Postmark deadline March 15, 2012

CERTIFICATION

Scholarship Management Services has the sole responsibility for selecting recipients based on criteria as set forth in the program's description. This application becomes the property of Scholarship Management Services. (It is recommended you keep a copy for your files.)

I acknowledge decisions are final. I certify I meet the eligibility requirements of the program as described in the guidelines and the information provided is complete and accurate to the best of my knowledge. If requested, I will provide proof of information, including an official transcript of grades. Falsification of information may result in termination of any award granted.

Applicant's Signature _____ Date _____

Employee's Signature _____ Date _____