



# AGC of Tennessee, Middle TN Branch

2924 Foster Creighton Dr, Nashville, TN 37204 ■ Phone (615) 244-6344 ■ Fax (615) 244-5439 ■ e-mail: Kelly@tnagc.org

## 2011 Undergraduate Scholarship Application

**Applicant:** Please complete **ALL** sections of this application. Type or print using black ink. Use N/A if question does not apply. **SEE COMPETITION RULES AND REGULATIONS.** Appearance and completeness **WILL BE CONSIDERED** during evaluation. **Mail complete package to:** AGC of TN Scholarship Program, 2924 Foster Creighton Dr, Nashville, TN 37204. Package must be **postmarked by May 31, 2011**

**OFFICE USE ONLY**

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### I. PERSONAL

A. Name: \_\_\_\_\_  
LAST FIRST MIDDLE

B. Address: 1. Home: \_\_\_\_\_  
NUMBER & STREET CITY STATE ZIP

2. College: \_\_\_\_\_  
NUMBER & STREET CITY STATE ZIP

C. At which address can you be contacted in late July/ early August?  Home  College

D. Telephone: 1. Home \_\_\_\_\_ 2. College \_\_\_\_\_ 3. Phone number where you can be contacted in July \_\_\_\_\_ Your E-mail Address: \_\_\_\_\_

E. Present Age (Optional) \_\_\_\_\_ F. Social Security #: \_\_\_\_\_

G. Are you a U.S. Citizen?  Yes  No  
Are you a TN Resident?  Yes  No

H. Marital Status:  Single  Married

1. Spouse's name: \_\_\_\_\_

2. Number of dependents: \_\_\_\_\_

I. 1. Parent or legal guardian's name: \_\_\_\_\_ 2. Relationship: \_\_\_\_\_

3. Address, if different than item B1 above: \_\_\_\_\_  
\_\_\_\_\_

**II. SCHOLASTIC INFORMATION**

A. Provide colleges and/or universities you have attended or any currently attending, with the most recent first. Be sure to indicate month and year of completion or anticipated graduation date.

Institution	Attendance (from/to)	Major	Month and Year of Completion or Anticipated Graduation Date
1. _____	CHECK ONE: <input type="checkbox"/> 2 YEAR PROGRAM	<input type="checkbox"/> 4 YEAR PROGRAM	<input type="checkbox"/> 5 YEAR PROGRAM
2. _____	CHECK ONE: <input type="checkbox"/> 2 YEAR PROGRAM	<input type="checkbox"/> 4 YEAR PROGRAM	<input type="checkbox"/> 5 YEAR PROGRAM
3. _____	CHECK ONE: <input type="checkbox"/> 2 YEAR PROGRAM	<input type="checkbox"/> 4 YEAR PROGRAM	<input type="checkbox"/> 5 YEAR PROGRAM

B. Provide on a separate sheet a chronological history of your activities if **NOT** continuously enrolled in school since high school graduation. History should begin immediately after high school graduation until the present time. Include specific month, year, and type of activity.

C. Current year in college: Sophomore Junior Junior in a 5-yr. program Senior in a 5-yr. program  
(CHECK ONE)

D. In what program do you expect to earn your degree? \_\_\_\_\_  
(PROVIDE EXACT DEGREE TITLE. E.G. BS IN CONSTRUCTION ENGINEERING)

E. Is your current or intended major a 4-year or 5-year program?  4-Year  5-Year

F. Are you enrolled in a Cooperative Education Program?  Yes  No  
 If Yes, indicate which semester(s) you will be in co-op: \_\_\_\_\_ A copy of your work/class schedule will be helpful.

G. Specify Grade Point Average below and send an official or unofficial grade transcript from the school you are presently attending, as well as transcripts from previously attended school(s).

1. Cumulative GPA \_\_\_\_\_ on a 4.0 scale.

H. Number of hours enrolled in this semester \_\_\_\_\_

I. In what extracurricular activities have you participated while attending college? Indicate elected offices held, if any. Specify purpose of local organizations. Add additional sheets as necessary.

1. Student activities (student government, sorority, National Honor Society, etc.): \_\_\_\_\_  
 \_\_\_\_\_

2. Community activities (Boy Scouts, church, etc.): \_\_\_\_\_  
 \_\_\_\_\_

3. Athletics: \_\_\_\_\_

4. Other: \_\_\_\_\_

J. List any honors, awards, etc. you have received while in college. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**III. EMPLOYMENT HISTORY**

A. List below full-time employment, summer employment, and/or part-time work briefly explaining duties and responsibilities (beginning with your most recent job). If part-time work, indicate number of hours per week. Add additional sheets as necessary.

1. From \_\_\_\_\_ To \_\_\_\_\_ AGC Member ? Yes \_\_\_ No \_\_\_ Don't Know \_\_\_  
MONTH/YEAR MONTH/YEAR

Firm's Name and Type of Business \_\_\_\_\_

Address \_\_\_\_\_

Supervisor's Name and Position \_\_\_\_\_ Tel: \_\_\_\_\_

Your Duties \_\_\_\_\_

\_\_\_\_\_ Salary \$ \_\_\_\_\_ per \_\_\_\_\_

2. From \_\_\_\_\_ To \_\_\_\_\_ AGC Member? Yes \_\_\_ No \_\_\_ Don't Know \_\_\_  
MONTH/YEAR MONTH/YEAR

Firm's Name and Type of Business \_\_\_\_\_

Address \_\_\_\_\_

Supervisor's Name and Position \_\_\_\_\_ Tel: \_\_\_\_\_

Your Duties \_\_\_\_\_

\_\_\_\_\_ Salary \$ \_\_\_\_\_ per \_\_\_\_\_

3. From \_\_\_\_\_ To \_\_\_\_\_ AGC Member? Yes \_\_\_ No \_\_\_ Don't Know \_\_\_  
MONTH/YEAR MONTH/YEAR

Firm's Name and Type of Business \_\_\_\_\_

Address \_\_\_\_\_

Supervisor's Name and Position \_\_\_\_\_ Tel: \_\_\_\_\_

Your Duties \_\_\_\_\_

\_\_\_\_\_ Salary \$ \_\_\_\_\_ per \_\_\_\_\_

**IV. SOURCES OF FUNDING FOR COLLEGE EXPENSES**

SOURCE	PERCENTAGE
1. Earned From Work	
2. From Family Members	
3. From Loans	
4. From Scholarships	
5. Other Sources (Specify)	
<b>Total:</b>	<b>100%</b>
Estimated Annual College Expenses (tuition, room, board, books)	\$

**V. ADDITIONAL INFORMATION**

Answer the following questions using only the space provided below.

A. Do you plan to pursue a career in the construction industry after graduation?  Yes  No  
If answer is "Yes", please answer questions 1-3 below. If "No", skip to Part B.

1. Why are you interested in a construction industry career and what event or series of events led you to this decision? Where possible, explain how your previous work experiences will relate to a construction industry career.

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2. What area of the construction industry are you most interested in?  Homebuilding  Design  
 Commercial Building  Highway/Heavy Civil  Municipal/Utilities  Other (explain) \_\_\_\_\_

3. What are your specific career goals after graduation? Five years later? \_\_\_\_\_

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B. Are any members of your immediate family presently employed in the construction industry?  Yes  No

1. a. Name \_\_\_\_\_ b. Relationship \_\_\_\_\_

c. Employer \_\_\_\_\_

d. Position in company \_\_\_\_\_

e. Is this an AGC firm?  Yes  No  Unknown

2. a. Name \_\_\_\_\_ b. Relationship \_\_\_\_\_

c. Employer \_\_\_\_\_

d. Position in company \_\_\_\_\_

e. Is this an AGC firm?  Yes  No  Unknown

**APPLICANT SIGNATURE**

I agree that the application and all attachments may be used for the purposes of evaluation and selection by the Construction Leadership Council and/or representatives designated by the Board of Directors.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Please use additional sheets to provide any other information that you feel is necessary to complete your application.*



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## COMPETITION RULES AND REGULATIONS 2011 Undergraduate Scholarship Program

**POSTMARK DEADLINE: May 31, 2011**

### A. Eligibility

1. Applicant **MUST** be an incoming college junior, or senior. Junior & senior applicants must have one full academic year of coursework remaining at the beginning of the fall term.
2. Applicant **MUST** desire a career in construction.
3. Applicant **MUST** be a full-time student unless currently employed in the construction industry
4. Applicant **MUST** be enrolled by August 1, 2011
5. Applicant **MUST** pursue a BS degree in concrete industry management, commercial construction management or construction-related engineering. A dual degree with construction or construction-related engineering as one part is acceptable.
6. Applicant **MUST** be a U.S. citizen or **documented** permanent resident of the United States (i.e. must possess a "permanent resident" card).
7. Applicant **MUST** be a resident in the state of TN
8. Applicant **MUST** be an active participant in the MTSU chapter of AGC.
9. Commercial construction graduate student may apply if they were members of the student chapter their senior year.
10. Commercial construction graduate student must write a 1 page summary of what they will do after graduation and how the scholarship will help them attain this goal.

### B. Requirements

1. Applicant is responsible for ensuring that all of the following items are submitted as one package and postmarked by May 31, 2011:
  - a. completed four-page, signed application. (including all required signatures)
  - b. **one** evaluation form completed by college faculty member.
  - c. official or unofficial **transcript** of college grades.
2. Incomplete application packages will **NOT** be considered.

### C. Awards

1. Scholarships will be a maximum of \$1,500 per student per year.
2. Applications will be reviewed and winners preselected by the Construction Leadership Council Board of Directors of the AGC of Tennessee, Middle Tennessee Branch.
3. All applicants selected as semi-finalists will be subject to a personal interview with a representative of the AGC CLC. Semi-finalists will be notified July, 2011.
4. Award(s) will be announced at the AGC Membership Luncheon in September 2011, and winners will be notified in August 2011.
5. Checks will be sent directly to the winners in August. **Checks will not be sent to recipient's college or university.**

Recipients are encouraged (not mandatory) to seek summer employment in construction during undergraduate enrollment.

### D. Miscellaneous

1. Send complete application package to:  
AGC of TN Scholarship Program  
ATTN: Kelly Dando  
2924 Foster Creighton Dr  
Nashville, TN 37204
2. For more information and copies of this application write to the above address, email: [kelly@tnagc.org](mailto:kelly@tnagc.org) or visit [www.tnagc.org](http://www.tnagc.org).

**NOTE: Applicants have the ultimate responsibility of ensuring that this application, all forms, and transcripts are received by the AGC of Tennessee and postmarked by May 31, 2011**

NOTE: To be completed by a school faculty member.

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## 2011 Undergraduate Scholarship Application FACULTY MEMBER PERSONAL EVALUATION SHEET

Name of Student \_\_\_\_\_  
LAST FIRST MIDDLE

Your name has been given as a reference by the above student who has applied for a scholarship from the AGC Education and Research Foundation to study construction or a construction-related engineering program. Your evaluation is important to us in considering this application. **Please complete this form (type or print using black ink) and return it to the student.**

Name of Evaluator: \_\_\_\_\_ Position: \_\_\_\_\_

Department Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Tel: \_\_\_\_\_

How long have you known the applicant? \_\_\_\_\_

Furnish information on the nature and frequency of your contacts and observations of the applicant: \_\_\_\_\_

### EVALUATION OF SOCIAL AND PERSONAL TRAITS

Please rate each characteristic listed, using a scale of 1 to 10, with "10" being "Superior" and "1" being "Poor." If you would like to make additional comments about the applicant, please use the reverse side of this form.

#### RATING

Characteristic	N/A	Poor		Below Average		Average		Above Average		Superior	
		1	2	3	4	5	6	7	8	9	10
Cooperation	0	0	0	0	0	0	0	0	0	0	0
Courtesy	0	0	0	0	0	0	0	0	0	0	0
Dependability	0	0	0	0	0	0	0	0	0	0	0
Industriousness	0	0	0	0	0	0	0	0	0	0	0
Initiative	0	0	0	0	0	0	0	0	0	0	0
Leadership	0	0	0	0	0	0	0	0	0	0	0
Maturity	0	0	0	0	0	0	0	0	0	0	0

Using the above evaluation, indicate your opinion of the applicant's ability to select a goal and achieve it: \_\_\_\_\_

Additional Remarks: Please use this space and reverse side of this form for any additional comments. \_\_\_\_\_

Signature: \_\_\_\_\_

NOTE: It is the applicant's responsibility to ensure that this form is submitted to the AGC of TN, Middle TN branch, postmarked by May 31, 2011. To ensure the confidentiality of your evaluation, please return it to the applicant in a sealed envelope with your handwritten signature across the seal.