

APPLICATION INFORMATION

The Virginia Automobile Dealers Association Education Foundation welcomes your application for an Automotive Technology Scholarship.

SCHOLARSHIP AWARDS

- ⊕ Scholarships are valued at \$3,000 (\$1,500 per year or \$750 per semester).
- ⊕ Scholarships are payable in 2 increments.
- ⊕ Recipient must be attending or planning to attend an automotive, diesel or auto collision technician program at a NATEF-certified Virginia technical or community college or in a factory-sponsored program.
- ⊕ The first installment will be presented upon registration as a full-time student at the technical college. Payment will be made to the college or program. Subsequent installments will be provided following successful completion of your automotive, diesel or auto collision technician program, a semester grade point average of 2.8 or better must be maintained, and re-enrollment in the respective technician classes for the next school term.
- ⊕ Scholarships are available only to graduating high school students successfully completing the AYES Program.

ELIGIBILITY

All applicants for any of the above scholarships must:

- ⊕ Be a Virginia resident.
- ⊕ Have a valid driver's license with a good driving record.
- ⊕ Be a graduating high school senior planning to enroll or currently enrolled for the Fall 2007 semester as an automotive, auto collision or diesel technician student at a NATEF-certified Virginia technical or community college or approved factory program.
- ⊕ Plan to pursue a professional career in the automotive, diesel or auto collision industry.
- ⊕ **Provide the Foundation with your test scores on the appropriate enclosed form. Applicant understands and acknowledges that scores will be verified.**
- ⊕ **Have successfully completed a series of assessment evaluations at one of the testing sites listed on the enclosed Scholarship Assessment Form. All Testing must be completed by March 31, 2007. Testing appointments should be made at least two weeks prior to the testing deadline.**
- ⊕ **All tests must be proctored by a Principal or Guidance Counselor. It is the applicant's responsibility to contact their automotive technology instructor and school Principal to schedule proctoring of the tests needed to qualify for scholarship consideration.**

SELECTION

- Applicants will be judged on the basis of information provided in the application, high school transcripts and attendance records, a letter of recommendation, and assessment evaluations.
- All applicants selected as finalists will be subject to a personal interview with a representative of the scholarship committee appointed by The Foundation. The committee will select the scholarship recipients. All decisions will be final.

APPLICATION FORM

Full Name: _____ S.S.#: _____

Permanent Address: _____ Phone: _____

City, State, Zip: _____ County: _____

Age: _____ Date of Birth: _____ Date of Graduation: _____

High School: _____ HS Phone: _____

I am currently an AYES Student Automotive Instructor: _____

Guidance Counselor: _____ Award Ceremony Date: _____

Full Name of Parent or Guardian: _____

1. Name of **NATEF-Certified VA College** you are planning to attend: _____

a. Please check the box below for the program in which you intend to enroll:

Automotive	Diesel	Auto Collision
<input type="checkbox"/> 1 Yr. Technical Diploma	<input type="checkbox"/> 1 Yr. Technical Diploma	<input type="checkbox"/> 1 Yr. Technical Diploma
<input type="checkbox"/> 2 Yr. Associate Degree	<input type="checkbox"/> 2 Yr. Associate Degree	<input type="checkbox"/> 2 Yr. Associate Degree
<input type="checkbox"/> ASSET <input type="checkbox"/> ASEP		
<input type="checkbox"/> T-10 <input type="checkbox"/> CAP		
<input type="checkbox"/> Tech Train		

b. Anticipated date of graduation from technical college: _____

2. List automotive related activities in which you have participated (such as Auto Tech/Auto Collision Youth Apprenticeship, Automotive Youth Educational Systems (AYES), Skills USA-VICA, Technical College Skills Competitions, trouble shooting contests, etc.):

3. List other activities in which you have participated (sports, music, community projects, etc.):

4. List committees served, offices held, or other leadership positions you have had:

5. List honors and awards received (such as National Honor Society, Scouts, etc.):

6. What do you feel are your academic strengths and weaknesses?

7. Discuss some of your long-term goals in the auto/truck retail industry:

8. Are you currently working in the automotive/truck industry? _____ Yes _____ No

If yes, where? _____

9. Do you have a valid drivers license with a good record? _____ Yes _____ No

Thank You!

Required Signature:

To the best of my knowledge, I have provided VADA full information concerning all questions on the application. I agree to report to VADA all factors and documentation, including assessment evaluations, transcripts and attendance information, which could affect consideration of my application. I understand that failure to provide true and complete information could mean withdrawal of scholarship monies.

Applicant Signature _____ Date _____

Name (please print) _____

COMPLETE APPLICATIONS INCLUDE:

- The completed application form.
- One letter of recommendation from a person such as former teacher or high school counselor, local auto or truck dealer, minister or priest, employer or neighbor.
- The completed evaluation form, preferably completed by your automotive instructor and mailed separately.
- Your high school transcript. (You may send additional transcripts as they become available and they will be added to your file.)
- Your high school attendance record indicating days absent from work in the past year.
- Assessment testing. All testing must be complete and the Testing Release Form returned separately by March 31, 2007.

Application Process (excluding testing) **must be completed by March 30, 2007**. All documents should be mailed to:

**Scholarship Coordinator
The VADA Education Foundation
P. O. Box 5407
Richmond, VA 23220-0407**

Incomplete applications will not be considered. Be sure to keep copies for your records.

Questions concerning this process can be directed to John Jessup, AYES Virginia Manager at 804-545-3012 or e-mailed to jjessup@vada.com.

TESTING RELEASE FORM

Students must schedule an appointment to take all required tests under the observation of a principal or guidance counselor. ***Please let the test site contact person know you are scheduling an appointment for the VADA Education Foundation Technician Scholarship Assessments and verify they know the deadline for returning results.*** Applicants are required to take the four ACCUPLACER tests, the AYES Engine Performance test, and one other AYES Placement test of their choosing.

Required tests include:

ACCUPLACER Tests:

- Reading Comprehension
- Sentence Skills
- Arithmetic
- Elementary Algebra

AYES Placement Tests (for AYES Students Only)

- Engine Performance Score: _____
- Other: _____ Score: _____

Whereas, I have submitted my application as a student to participate in The VADA Education Foundation Automotive Technology Scholarship, I hereby authorize and grant permission to the college testing site and The VADA Education Foundation Scholarship Committee, or either one, to release to each other, any information relating to the ACCUPLACER and AYES Placement Tests.

Name of Applicant (please print): _____

Applicant Signature: _____ Date: _____

If applicant is under 18 years old:

Name of Legal Guardian (please print): _____

Guardian Signature: _____ Date: _____

Testing must be completed by April 16, 2007.

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The VADA Education Foundation
P. O. Box 5407
Richmond, VA 23220-0407**

TAKE THIS FORM WITH YOU TO YOUR TESTING APPOINTMENT AND TURN IT IN TO THE ADMINISTRATOR OF YOUR TESTS – TEST SITES WILL NOT RELEASE YOUR TEST RESULTS WITHOUT THIS FORM.



Virginia Automobile
Dealers Association
**EDUCATION
FOUNDATION**

Scholarship EVALUATION FORM

Must Be Returned By March 30, 2007

To be completed by automotive instructor or guidance counselor (for students not enrolled in a high school level automotive technology program) and ***mailed independent of the student's application form.***

Name of scholarship applicant: _____

Please rate this applicant with respect to the following:

	Low		Average		High	Comments
Intellectual Ability	1	2	3	4	5	_____
Responsibility, Dependability	1	2	3	4	5	_____
Academic/Professional Growth Potential	1	2	3	4	5	_____
Leadership	1	2	3	4	5	_____
Ability to Work with Others	1	2	3	4	5	_____
Motivation/Initiative	1	2	3	4	5	_____
Communication Skills	1	2	3	4	5	_____

What are the applicant's strongest characteristics and abilities? _____

What factors do you think we should particularly consider in our evaluation of this applicant? _____

Additional comments necessary for evaluation of this applicant: _____

Length of time you have known applicant: _____ In what capacity? _____

Name: _____ Title: _____

Department or Organization: _____ Phone: _____

Signature: _____ Date: _____

Thank you!

Please return this form and/or your letter of recommendation to:

**Scholarship Coordinator
The VADA Education Foundation
P. O. Box 5407
Richmond, VA 23220-0407**