In 2004, NCPMA established an education foundation to award deserving students funding for post-high school instruction at technical schools, colleges and universities. Scholarships ranging up to $10,000 will be awarded to owners or employees, or children and grandchildren of an owner or employee, who currently work for a NCPMA member company in good standing for the past two years. An applicant's parents or grandparents must fulfill a two year minimum requirement of working in the pest control industry. If this obligation is not fulfilled, the money is subject to full repayment. High School Seniors are welcome to apply but any award would be contingent upon proof of graduation/college enrollment.

It is with great pleasure that we offer to you this opportunity to apply for the North Carolina Pest Management Education Foundation Scholarship.

APPLICATION DEADLINE - May 1, 2019 - Must be postmarked or faxed by this date. **
All applicants will be notified within a week that their application has been received. **
GENERAL INFORMATION

First:______________________   Middle:_______   Last:_________________________________

Address:__________________________________________
City, State:_____________________________________   Zip:_____________________________
Phone:_________________________________________

Date of Birth:___________________________________  Marital Status: Single or Married

Email:_________________________________________  Date of Submission:____/____/______

EMPLOYMENT HISTORY

List employers for the past five years beginning with your present or most recent employer: Please designate part or full time employment for each position.

<table>
<thead>
<tr>
<th>Employer</th>
<th>Position/Duties</th>
<th>Dates</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

EDUCATION HISTORY

I presently attend:  

☐ High School  ☐ Junior/Community College  ☐ 4-year College
☐ Graduate School  ☐ Vocational School  ☐ NA

Name of School:_____________________________________________________________________
City/State/Zip:____________________________________________________________________

Next fall term, I will be attending:  

☐ Junior/Community College  ☐ 4-year College
☐ Graduate School  ☐ Vocational School

I will be a:  

☐ Freshman  ☐ Sophomore  ☐ Junior  ☐ Senior  ☐ Graduate Student

My college will be:____________________________________________________________________
City/State/Zip:____________________________________________________________________

High School Attended:_______________________________________________________________

Date Graduated:_________________________   GPA:_________________________

................................................................................................................................................

College Attended:____________________________________________________________________

Degree/Major:______________________________________________________________________

Years Attended:_________________________   Date Graduated:_________________________   GPA:_______

Post Graduate/Continuing Education (please specify):____________________________________

................................................................................................................................................

Note: It is important that your most recent academic records accompany this application.
ACTIVITIES

List your current community or extracurricular activities:

List any academic honors you have received:

List any office or other leadership positions you have held:

EDUCATIONAL PROGRAM

Describe the educational program for which you are seeking this scholarship, including the name of the institution or organization sponsoring the program, the subject matter or area of study, how long it will take to complete, the cost of the program and whether any degree or certificate will be awarded upon completion. Please attach any printed material describing the program or the sponsoring institution.

Explain your reasons for applying for this scholarship and why you believe it should be awarded to you.

What are your goals for the first five years after earning your degree?
**STUDENTS INCOME AND EXPENSES FOR ONE YEAR**

<table>
<thead>
<tr>
<th>INCOME</th>
<th>EXPENSES</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. From scholarships, fellowships or tuition waivers</td>
<td>1. Tuition: Private $________</td>
</tr>
<tr>
<td>$________</td>
<td>In-State $________</td>
</tr>
<tr>
<td>2. From your savings/investments</td>
<td>2. Fees, books, supplies $________</td>
</tr>
<tr>
<td>$________</td>
<td>Out-of State $________</td>
</tr>
<tr>
<td>3. Earnings during school year</td>
<td>3. Room &amp; board at school $________</td>
</tr>
<tr>
<td>$________</td>
<td>$________</td>
</tr>
<tr>
<td>4. Earnings during summer</td>
<td>4. Rent, food, utilities off campus $________</td>
</tr>
<tr>
<td>$________</td>
<td>$________</td>
</tr>
<tr>
<td>5. Earnings of spouse, if applicable</td>
<td>5. Clothing, laundry, cleaning $________</td>
</tr>
<tr>
<td>$________</td>
<td>$________</td>
</tr>
<tr>
<td>6. Financial aid from parents</td>
<td>6. Other $________</td>
</tr>
<tr>
<td>$________</td>
<td>$________</td>
</tr>
<tr>
<td>7. Loans (bank, school, gov’t.)</td>
<td>7. Loans (bank, school, gov’t.) $________</td>
</tr>
<tr>
<td>$________</td>
<td>$________</td>
</tr>
<tr>
<td>8. Other $________</td>
<td>$________</td>
</tr>
</tbody>
</table>

**TOTAL:** $________ **TOTAL:** $________

State whether you are eligible for reimbursement from any other source for any of the expenses to be incurred in participating in this educational program and, if so, the amount eligible for reimbursement.

________________________________________________________________________________________________
________________________________________________________________________________________________

I currently live with my parents during school ___ Y ___N, During Summers ___Y ___N

**REQUIRED SIGNATURES:**

If you are claimed by your parents/guardians as a tax deduction, they must complete and sign the section below:

Parents Occupation:_______________________________________________________________________

Number of dependents in home:

Number of dependent children attending college, including applicant:___________________________

Parents’/guardians’ income: □ Under $20,000 □ $20,000-$40,000 □ $40,000-$60,000

□ $60,000-$75,000 □ $75,000 - $100,000 □ over $100,000

Parent/Guardian Signature:________________________ Date:________________________

Please provide proof of your income by attaching an IRS transcript validating your most recent tax return filing. Transcripts can be ordered on-line (www.irs.gov) or by calling 800.829.1040.

**Independent Status:**

If you are NOT claimed as a dependent by your parents/guardians, please provide proof of your independent status by attaching an IRS transcript validating your most recent tax return filing. Transcripts can be ordered on-line (www.irs.gov) or by calling 800.829.1040.

State the amount of scholarship funds you are seeking and provide an estimated breakdown of how these funds will be spent. ____________________________________________________________

I agree to furnish the NCPMA Education Foundation proof of course completion and grade point average. In completing this application for the NCPMA Education Foundation Scholarship, I certify that, to the best of my knowledge, the information contained in this application is complete and accurate.

Signature of Applicant:________________________________________________________

Date:________________________________________

We are aware that this applicant is applying for a NCPMA Education Foundation Scholarship and support this effort.

Signature of NCPMA member verifying this application:______________________________________________

Company:________________________________________________________

Address:________________________________________________________

Date:________________________________________

For additional information, call the NCPMA office at 800.678.6722 or fax to 703.353.6762

<table>
<thead>
<tr>
<th>FOR NCPMA EDUCATION FOUNDATION OFFICE USE ONLY:</th>
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<tbody>
<tr>
<td>Date received: __________ Date sent to committee: __________ Date of action: __________</td>
</tr>
<tr>
<td>□ Approved □ Amount $_________</td>
</tr>
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</table>