



TILE CONTRACTORS

ASSOCIATION OF HAWAII

95-1030 Meheula Parkway #892711 EMililani, Hawaii 96789 É(808) 295-7064

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### **2017 Membership Scholarship Program**

On behalf of the Board of Trustees of the Tile Contractors Association of Hawaii, we have created a Membership Scholarship Program to recognize and assist the families of our signatory members in creating an opportunity for our youth to further their educational pursuits. The scholarship is solely based on MERIT.

- Student will be awarded up to a **\$2,500.00** monetary scholarship to be applied to the 2017-2018 school year.
- Students who are related to a signatory member of the TCAH can apply.
- High school seniors and/or full time students enrolled at an accredited two or four year college or university may apply. Vocational and technical schools are not eligible.
- Attached is the application and details.
- Previous recipients are allowed to apply once again.
- DEADLINE to submit the application is July 14, 2017.

### **Membership Eligibility Requirement**

- Must be a Hawaii resident and a full time employee of a current signatory member of the Tile Contractors Association of Hawaii.
- A letter by the Administrator, Hawaii Administrators, LLC. will be provided to the trustees to verify that the member company is in good standing with the association.

### **Student Applicant Eligibility Requirement**

- Applicant may be a sibling, child or grandchild of a full time employee of a current signatory member of the Tile Contractors Association of Hawaii.
- The student must be graduating/a graduate from a Hawaii public or private high school and a Hawaii resident.
- The scholarship will be solely based on merit and judged on the 2016-2017 school year's grade point average, GPA, SAT, ACT, etc.

### **Submission of Required Information**

- Proof of family relationship such as marriage, legal dependency or blood-related must be provided.
- A letter from owner of the member company of the Tile Contractors Association of Hawaii must be provided on company letterhead to confirm the full time employment by applicant's relative.
- Completed application
- List of grade point average, GPA, SAT, ACT or any other test scores. High school or last term college transcripts are required.
- List of honors and awards received based on academic excellence and athletic achievement and any other evidence of personal motivation to strive to learn.
- List community activities during the last year.
- Statement of career goals.
- One teacher recommendation letter on affiliated school letterhead.
- One non-relative personal recommendation letter.
- Completed application and package postmarked by the DEADLINE of July 14, 2017 to:

TCAH Scholarship Program  
Mr. Will Giles  
Hawaii Administrators, LLC,  
95-1030 Meheula Parkway #892711  
Mililani, Hawaii 96789

**Scholarship Application**

*Please print clearly or type.*

**TCAH MEMBER**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

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

Company Phone: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Relationship to Applicant: \_\_\_\_\_

**STUDENT APPLICANT**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

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

**CURRENT STATUS:** High School: \_\_\_\_\_ College: \_\_\_\_\_ Graduate School: \_\_\_\_\_

Name of School: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

School Phone Number: \_\_\_\_\_

Graduation Year: \_\_\_\_\_ Size of Class: \_\_\_\_\_ Last GPA: \_\_\_\_\_

**Aptitude Test Scores** (where applicable)

ACT Composite Score (or) SAT Score: Written: \_\_\_\_\_ Math: \_\_\_\_\_ Total: \_\_\_\_\_

Please Circle: GRE LSAT MCAT Scores: \_\_\_\_\_

Please attach a separate sheet to list honors and awards you have received.

Please attach a separate sheet to list community activities during the last year.  
Also indicate the hours per week.

Please attach a separate sheet to state the career(s) you are pursuing?

Student Signature: \_\_\_\_\_ Date \_\_\_\_\_

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