



Please complete the application, and include a brief statement on how you intend to use your scholarship money and any other information that may help the Scholarship Committee determine your eligibility. Your statement should not exceed 1200 words. If a high school or college student, please include Transcripts, GPA, and major area of study. Please include a resume and up to two (2) letters of recommendation if you are a high school or college student.

1. The completed & signed application along with additional documentation must be received by June 30, 2020

Items can be emailed to carrie.faulkner@lpins.net You can also call with any questions, (702) 218-6598

2. You must be pursuing a career in a building related field during the 2020/2021 academic year at a school in the state of Nevada.

Contact Information

Full Name: _____ Application Date: _____
Mailing Address: _____
City: _____ State: _____ Zip _____
Phone: (____) _____ Email: _____

Education

Name of Current High School/College/Vocational/or Technical School: _____
Address: _____ City: _____ State: _____
Academic Major: _____ Current GPA: _____ Expected Graduation Date: _____
Name of School Attending for 2020/2021 Academic Year: _____
City: _____ State: _____ Year in School: _____
Expected Degree: _____ Expected Graduation Date: _____

Additional Post Secondary Education (if applicable) University, College, Vocational, or Technical Schools attended.
1.) Institution Name: _____ City: _____ State: _____
Enrollment Dates: From ___/___ to ___/___ Course of Study: _____
Degree/Certificate Earned (if any): _____ Ending GPA: _____
2.) Institution Name: _____ City: _____ State: _____
Enrollment Dates: From ___/___ to ___/___ Course of Study: _____
Degree/Certificate Earned (if any): _____ Ending GPA: _____

Extra-Curricular/Community Services Activities

In the section below, enter the name(s) of the activity(s) in which you have participated. Please detail the time commitment you expended on each activity. When applicable, indicate whether you received a varsity letter or served in a leadership position. Please attach a separate sheet of paper if needed.

1.) Organization/Activity: _____ City: _____ State: _____
Time Commitment: From ___/___ to ___/___ Average Hours participated in per week: _____
Participation: _____
2.) Organization/Activity: _____ City: _____ State: _____
Time Commitment: From ___/___ to ___/___ Average Hours participated in per week: _____
Participation: _____

Education Goals

What educational studies do you plan to pursue or are you currently pursuing: _____
Why are you applying for this scholarship? _____
How will this scholarship help you attain your goal? _____
Describe any other financial aid or scholarships you will receive? _____

References

1.) Name: _____ Phone: (____) _____ Email: _____
Length of Time Known: _____ Relationship Status: _____
2.) Name: _____ Phone: (____) _____ Email: _____
Length of Time Known: _____ Relationship Status: _____

I attest that the information contained in this application is true and accurate. I agree that this application and supporting documents may be used for the purpose of evaluation and selection for the scholarship. I agree to provide my social security number and birth date to PWB if I am chosen to receive this scholarship. I give permission for SNHBA & PWB to use my name and photo in future scholarship advertising if I am selected to receive this scholarship.

Signature: _____ Printed Name: _____