

# NEREF SCHOLARSHIP PROGRAM



## THE PROGRAM

The North East Roofing Educational Foundation (NEREF) has established a scholarship program to assist employees, immediate family members of employees, or the immediate family of NERCA members who plan to pursue post-secondary education in college and vocational programs. Scholarships will be offered each year for full-time study at any accredited post-secondary institution of the student's choice.

## ELIGIBILITY

Applicants to the North East Roofing Educational Foundation Scholarship Program must be:

- Members of NERCA, their employees, or their respective immediate family. Immediate family is defined as self, spouse, or child. The child may be natural, legally adopted, or a stepchild.
- High school seniors or graduates who plan to enroll in a full-time undergraduate course of study at an accredited two or four-year College, University, or Vocational-Technical school.

## AWARDS

Fifteen scholarships will be awarded this year in the amount of \$3,000 each. Payment is made in August and checks will be mailed to the bursar of the school where the scholarship winner will do his or her undergraduate work.

## APPLICATION

Interested students must complete the attached application and mail it along with a current and complete transcript of grades to NEREF postmarked no later than May 15, 2020. Applications may be reproduced as needed.

Applicants are responsible for gathering and submitting all necessary information. Applications are evaluated on the information supplied; therefore, answer all questions as completely as possible. All information received is considered confidential.

## SELECTION OF RECIPIENTS

Scholarship recipients are selected based on academic record, potential to succeed, leadership, and participation in school and community activities, honors, work experience, a statement of educational and career goals, and an outside appraisal. Financial need is not considered.

Final selection of recipients is made by the NEREF Board of Trustees. Award recipients will be notified by June 30. Not all applicants to the program will be selected as recipients. Students may reapply to the program each year they meet the eligibility requirements.

## REVISIONS

The North East Roofing Educational Foundation reserves the right to review the conditions and procedures of this scholarship program and to make changes at any time including termination of the program.

## ADDITIONAL INFORMATION

Questions regarding the scholarship program should be addressed to:

North East Roofing Educational Foundation, Inc.  
Scholarship Program  
100 Grossman Drive Suite 300  
Braintree, MA 02184  
Telephone: (781) 849-0555  
Fax: (781) 849-3223  
Website: <http://www.nerca.org>

# NEREF SCHOLARSHIP PROGRAM



Type or print all information except for signatures. If space provided in any section is inadequate, information may be continued on additional sheets of paper. Attach additional sheets to the original document.

**Application Postmark Deadline is  
May 15, 2020**

**PERSONAL** LAST: \_\_\_\_\_ FIRST: \_\_\_\_\_ MIDDLE INITIAL: \_\_\_\_\_  
HOME ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
DATE OF BIRTH: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_  
SOCIAL SECURITY NUMBER: \_\_\_\_\_  
MARITAL STATUS: \_\_\_\_\_ NUMBER OF DEPENDENTS: \_\_\_\_\_

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**EMPLOYEE PARENT OR GUARDIAN INFORMATION** LAST: \_\_\_\_\_ FIRST: \_\_\_\_\_  
EMPLOYER: (MUST BE A NERCA MEMBER) \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
WORK TELEPHONE: \_\_\_\_\_  
RELATIONSHIP TO APPLICANT: \_\_\_\_\_

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**HIGH SCHOOL DATA** SCHOOL NAME: \_\_\_\_\_ GRADUATION DATE: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_  
SCHOOL TELEPHONE: \_\_\_\_\_

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**TRANSCRIPT INFORMATION** 1. Students currently or previously enrolled in college or vocational-technical school must include all college or vocational-technical transcripts of grades.  
2. High School seniors and students who have completed less than two full semesters of post-secondary education must include a high school transcript of grades and GPA based on courses to date.

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**CERTIFICATION** In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. If requested, I agree to give proof of information I have given on this form. Falsification of information may result in termination of any scholarship granted. This application becomes property of NEREF.  
SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

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- APPLICATION CHECKLIST** Applicant is responsible for ensuring that all items listed below are submitted to the North East Roofing Educational Foundation and postmarked by May 15, 2020.
- COMPLETED APPLICATION
  - EVALUATION FORM.
  - OFFICIAL TRANSCRIPTS OF HIGH SCHOOL AND/OR COLLEGE GRADES

**POST-SECONDARY SCHOOL DATA**

Name of post-secondary school you plan to attend. (If unknown, please list in order of preference to schools to which you have applied.) Use official school names.

SCHOOL: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

SCHOOL: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

TYPE OF SCHOOL:  4-year college or university  2-year Community or Junior college  Vocational-Technical School  Other:

ANTICIPATED DATE OF GRADUATION: \_\_\_\_\_ ENROLLMENT DATE: \_\_\_\_\_

MAJOR OR COURSE OF STUDY: \_\_\_\_\_

**WORK EXPERIENCE**

Describe your work experience during the past four years. Indicate dates of employment for each job and number of hours worked each week.

<i>Employer/Position</i>	<i>Dates (Month/Year)</i>		<i>Hours per week</i>	<i>Amount Earned</i>
	<i>From</i>	<i>To</i>		

**VOLUNTEER EXPERIENCE**

Describe any volunteer experience during the past four years. Indicate dates the organization for each and number of hours each week.

<i>Employer/Position</i>	<i>Dates (Month/Year)</i>		<i>Hours per week</i>	<i>Amount Earned</i>
	<i>From</i>	<i>To</i>		

**ACTIVITIES, AWARDS, & HONORS**

List all activities, both school and community, in which you have participated in during the last four years. Please include any special awards, honors, or offices held. Indicate whether high school or college.

<i>Activity</i>	<i>No of years participated</i>	<i>Special Awards, Honors</i>	<i>Offices Held</i>

**On a separate piece of paper, please type your responses to the following questions. Please limit your submissions to 250 words or less.**

**CAREER CHOICES**

Why you are interested in your career choice and what event, or series of events have led you to this decision?

**PERSONAL EXPERIENCES**

What has been your most important extracurricular activity, your most important contribution to it, and what has your participation in it meant to you as an individual?

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## APPLICANT EVALUATION

To be completed by a high school or college counselor or advisor, an instructor, or a work supervisor who knows you well. You have been asked to provide information in support of this application to the NEREF Scholarship. ***If providing additional information please do not include the applicants name, as during the selection process applicants remain anonymous. However, please include this form with the additional information for identification purposes.*** Please give immediate and serious attention to the following statements. **Please type or print using black ink.**

When completed please return to applicant or forward directly to the foundation (postmarked no later than May 15, 2020):

NORTH EAST ROOFING EDUCATIONAL FOUNDATION  
100 GROSSMAN DRIVE – SUITE 300 BRAINTREE MA 02184

APPLICANT'S NAME: \_\_\_\_\_

NAME OF EVALUATOR: \_\_\_\_\_

RELATIONSHIP TO APPLICANT: \_\_\_\_\_

OCCUPATION/SCHOOL: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

HOW LONG HAVE YOU KNOW THE APPLICANT? \_\_\_\_\_

FURNISH INFORMATION ON THE NATURE AND FREQUENCY OF YOUR CONTACTS AND OBSERVATIONS OF THE APPLICANT

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|---|--|--------------------------------------|--|
| THE APPLICANT'S CHOICE OF POST-SECONDARY EDUCATIONAL PROGRAM IS                             | <input type="checkbox"/> EXTREMELY APPROPRIATE | <input type="checkbox"/> APPROPRIATE | <input type="checkbox"/> INAPPROPRIATE |
| THE APPLICANT'S ACHIEVEMENTS REFLECT HIS/HER ABILITY  | <input type="checkbox"/> EXTREMELY WELL        | <input type="checkbox"/> WELL        | <input type="checkbox"/> NOT WELL      |
| THE APPLICANT'S ABILITY TO SET REALISTIC AND ATTAINABLE GOALS IS                            | <input type="checkbox"/> EXCELLENT             | <input type="checkbox"/> GOOD        | <input type="checkbox"/> POOR          |
| THE QUALITY OF THE APPLICANT'S COMMITMENT TO SCHOOL, WORK AND/OR COMMUNITY IS               | <input type="checkbox"/> EXCELLENT             | <input type="checkbox"/> GOOD        | <input type="checkbox"/> POOR          |
| THE APPLICANT DEMONSTRATES CURIOSITY AND INITIATIVE   | <input type="checkbox"/> EXTREMELY WELL        | <input type="checkbox"/> WELL        | <input type="checkbox"/> NOT WELL      |
| THE APPLICANT DEMONSTRATES GOOD PROBLEM-SOLVING SKILLS, FOLLOWS THROUGH AND COMPLETES TASKS | <input type="checkbox"/> EXTREMELY WELL        | <input type="checkbox"/> WELL        | <input type="checkbox"/> NOT WELL      |
| THE APPLICANT'S RESPECT FOR SELF AND OTHERS IS  | <input type="checkbox"/> EXCELLENT             | <input type="checkbox"/> GOOD        | <input type="checkbox"/> POOR          |

ADDITIONAL COMMENTS:

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SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_