

I.S.E.E. CONNECTICUT VALLEY CHAPTER
International Society of Explosives Engineers
96 Sebeth Drive
Cromwell, Connecticut 06416
APPLICATION FORM

Date _____

Name of applicant _____

Home address _____

Phone (____) _____

Educational Background

High School: _____
(name) (location)

College or University: _____

Address: _____

Graduation Date: _____

Degree _____ Major _____ Minor _____

Faculty advisor: _____

List previous honors, distinctions & accomplishments:

List construction related experiences if any:

(Please complete reverse side of this application)

Explain briefly your educational and/or training goals:

Explain briefly your need for scholarship funds:

Completed application

should be submitted to: Ct. Valley Chapter I.S.E.E. _____

REFERENCES UPON REQUEST

Name	Yrs. Known	Address	Phone No.
_____	_____	_____	_____
Name	Yrs. Known	Address	Phone No.
_____	_____	_____	_____
Name	Yrs. Known	Address	Phone No.
_____	_____	_____	_____

I give the Registrar permission to provide a copy of my _____ transcript to the Scholarship Committee. I certify all information on this application to be correct and true to the best of my knowledge.

Signed: _____ Date _____

Please return to Mary Jane Lynch by March 4th