



**NATIONAL ASSOCIATION OF POWER ENGINEERS (NAPE)
DC CHAPTER #1
PAST PRESIDENTS' SCHOLARSHIP FUND APPLICATION**

STATEMENT OF NEED

Each calendar year the Past Presidents' Scholarship Fund of NAPE DC Chapter #1 will award one scholarship. This scholarship is limited to the following:

- ❖ There will only be one scholarship given annually.
- ❖ The scholarship will cover all of the costs associate with one class (tuition, books, lab fees/materials and taxes).
- ❖ The class must be taken through the National Association of Power Engineers Educational Foundation (NAPEEF).
- ❖ The scholarship recipient must be a current member in good standing of the NAPE DC #1 Chapter.
- ❖ Applications for scholarships will be accepted at any time. However, only one scholarship will be awarded each calendar year.
- ❖ To apply for a scholarship, applicants must complete and submit this Statement of Need. Decisions to award scholarships will be made by the Past Presidents of NAPE DC #1 based upon the information provided in this application. All requested information must be provided for the applicant to be considered. If something is not applicable, please mark it as "N/A" (not applicable).

Questions? Please contact the administrative office of NAPEEF at either 703-845-7055 or by emailing pam@napeef.org with any questions you may have.

Applicant Information:

Name of Applicant: _____
(please print clearly)

Address: _____

Telephone Number: _____

Email Address: _____

Information on the Class You Wish to Take:

Class Name: _____

Class ID Number: _____ Starting Date: _____

Total Cost of Class (use Non-Member Pricing): _____

Please note: It is important that you verify that you have already successfully completed all pre-requisites for this course.

Please describe why you want to take this class:

Please explain why you need the financial help provided by this scholarship:

Employment Information: By providing this information you are giving NAPE permission to contact your supervisor.

Name of your employer: _____

Supervisor's Name: _____

Supervisor's Telephone Number: _____

Supervisor's Email Address: _____

Please make sure that all requested information is provided and that you've signed and dated in the following spaces.

(signature)

(date)

Please send or deliver your completed application to:

**NAPE Chapter DC #1
Past Presidents' Scholarship Fund
5520 Cherokee Avenue
Suite 250
Alexandria, Virginia 22312**