

**Mail Applications to: IACHES  
Attention: Scholarship Program  
Cheryl Mencsik, Secretary  
P.O. Box 55  
LaGrange, IN 46761**

**Please direct questions to Cheryl at (260) 499-1218 or [iaches@earthlink.net](mailto:iaches@earthlink.net)**

## **Indiana Association of County Highway Engineers and Supervisors Scholarship Award Application**

### **I. Personal Information**

*Name:*

\_\_\_\_\_

Last	First	Middle Initial
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*Campus Address:*

\_\_\_\_\_

Number and Street	City	State	Zip
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*Permanent Address:*

\_\_\_\_\_

Number and Street	City	State	Zip
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*Phone Number:*

Campus \_\_\_\_\_ Permanent \_\_\_\_\_

*Email Address:*

\_\_\_\_\_

*Referenced by active member of Indiana Association of County Engineers and Supervisors  
Member? (circle one)*

Yes

No

*If yes, include member name:\_\_\_\_\_*

**II. Educational Background**

(Please include a transcript for current academic year)

Attending College/University \_\_\_\_\_

School Name

Dates Attended

Major

Area of Specialty

In the Fall of \_\_\_\_\_, my classification will be (circle one)

Freshman

Sophomore

Junior

Senior

5<sup>th</sup> Year

Expected Degree and Date of Graduation: \_\_\_\_\_

Cumulative G.P.A.: \_\_\_\_\_

Completed Courses Relevant to Municipal Government, including Engineering, Management or Public Works:

\_\_\_\_\_  
Grade: \_\_\_\_\_  
\_\_\_\_\_  
Grade: \_\_\_\_\_  
\_\_\_\_\_  
Grade: \_\_\_\_\_  
\_\_\_\_\_  
Grade: \_\_\_\_\_

Anticipated Courses Relevant to Municipal Government, including Engineering, Management or Public Works:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List any extracurricular activities in which you have participated. Indicate elected offices held and awards received. Indicate the year in which you participated in each activity and the average number of hours per month spent in that activity. You may attach a separate page if necessary.

(a) Student Activities (Professional Societies, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(b) Community Activities (Service Clubs, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(c) Other Non-Academic Activities

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(d) Honors Awards and Publications

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### III. Employment History

List below full-time employment, summer/co-op employment, part-time, summer internships or voluntary work. If work was performed for a city, county or town, include that agency's name in place of company name. Briefly explain duties and responsibilities and include reference or contact person if available. Begin with your most recent job. Attach additional pages if necessary.

1. **From** \_\_\_\_\_ **To** \_\_\_\_\_  
(month/yr) (month/yr)  
Company Name \_\_\_\_\_  
Type of Business \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Hours per week \_\_\_\_\_  
Primary Duties \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. **From** \_\_\_\_\_ **To** \_\_\_\_\_  
(month/yr) (month/yr)  
Company Name \_\_\_\_\_  
Type of Business \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Hours per week \_\_\_\_\_  
Primary Duties \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. **From** \_\_\_\_\_ **To** \_\_\_\_\_  
(month/yr) (month/yr)  
Company Name \_\_\_\_\_  
Type of Business \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Hours per week \_\_\_\_\_  
Primary Duties \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. **From** \_\_\_\_\_ **To** \_\_\_\_\_  
(month/yr) (month/yr)  
Company Name \_\_\_\_\_  
Type of Business \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Hours per week \_\_\_\_\_  
Primary Duties \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### **IV. Supporting Documentation**

- a) Attach an essay explaining your understanding of municipal government and the role that the city or town engineer plays in the planning, management, design and construction of transportation and infrastructure systems. You may include your ideas, opinions and suggestions on how to improve the availability of educational opportunities to study careers in municipal government and public service. This essay should be typewritten, and no longer than two pages in length.
  
- b) If you are receiving a reference from an active member of the Indiana Association of County Engineers and Supervisors (IACHES), please have that member complete the Reference Form and attach to this application.
  
- c) Additional References: Please provide a minimum of one reference for each of the following categories: Personal, Employment, Academics. Include name, title, company/organization, address, phone number and email address if available, as listed on the Reference Form.

I certify that the information provided on this application is true and correct, and that this information may be used for the purpose of evaluation and selection of the Scholarship Award Recipient by the IACHES Scholarship Committee. By signing this application, I further authorize the Indiana Association of County Engineers and Supervisors to confirm and/or release any information included in this application.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

# Reference Form

Applicants Name

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IACHES Member Referring Applicant

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Additional information to be considered by Committee (relationship, work experience, character and other qualifications of applicant, etc.)

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**Personal Reference:**

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

Title/Relationship: \_\_\_\_\_

Company/Organization: \_\_\_\_\_

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

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Phone#: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Employment Reference:**

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

Title/Relationship: \_\_\_\_\_

Company/Organization: \_\_\_\_\_

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

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Phone#: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Academic Reference:**

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

Title/Relationship: \_\_\_\_\_

Company/Organization: \_\_\_\_\_

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

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Phone#: \_\_\_\_\_

Email Address: \_\_\_\_\_