Florida Energy Pipeline Association Scholarship Application Form

SCHOLARSHIP PROGRAM APPLICATION

(HIGH SCHOOL APPLICANTS)

Florida Energy Pipeline Association PO Box 13842 Tallahassee, FL 32317 Office: 850-514-5183 The Florida Energy Pipeline Association (FEPA) has established a Scholarship Fund. The Fund has been established to offer assistance to academically qualified students to continue pursuing a degree at a two or four year accredited university, college, or trade school. Scholarships will be based on such criteria as academic achievement, financial need, extracurricular activities, community involvement, career goals, moral character, etc. The Fund has been established by the direct efforts of the FEPA Scholarship Committee and monies raised from FEPA activities and individual member contributions. The FEPA Scholarship Committee will be comprised of the three preceding FEPA presidents available to serve.

SCHOLARSHIP INFORMATION:

- All scholarships will be awarded in the amount of \$2,500.00.
- All award checks will be written payable to the scholarship recipient or the educational institution they attend
- Awards will be distributed at the discretion of the Florida Energy Pipeline Association.
- The amount to be awarded will be determined annually based on funds available.
- Recipients will be notified on or about July 31, 2024.

ELIGIBILITY (VERY IMPORTANT, PLEASE READ)

To be considered for the FEPA Scholarship, the applicant:

- must have at least one of the following ties with FEPA
 - > must be a natural gas distribution or pipeline system full-time employee who has been continuously employed for at least one year with that system, and where that system is a multiple distribution utility, works for the natural gas division of that system. The distribution system must be located within the state of Florida and be a member in good standing with the Florida Energy Pipeline Association. Also, the employee must reside within the state of Florida, or;
 - > must be a dependent child or grandchild of a natural gas distribution or pipeline system full-time employee who has been continuously employed for at least one year with that system, and where that system is a multiple distribution utility, works for the natural gas division of that system. The distribution system must be located within the state of Florida and be a member in good standing with the Florida Energy Pipeline Association. Also, the employee and dependent child or grandchild must reside within the state of Florida to be eligible, or;
 - must be a dependent child of a FEPA vendor member company, in good standing, for at least one year;
- must be a current student in good standing, in accordance with current institutional policies, with a grade point average of 3.0, or higher.
- must intend to and eventually enroll in an accredited university, college, or trade school as a full time student (12 or more credit hours per semester).

• must complete pages 3-7 of the FEPA Scholarship application and submit prior to June 1, 2024.

PLEASE NOTE: Complete Applications submitted to FEPA by the deadline of June 1, 2024 will be given every consideration by the Scholarship Fund, but please be advised that submitting an application does not automatically guarantee you will receive a scholarship. FEPA reserves the right to determine scholarship recipients, based on the criteria outlined above.

FLORIDA ENERGY PIPELINE ASSOCIATION SCHOLARSHIP APPLICATION (HIGH SCHOOL STUDENTS)

Application deadline is June 1, 2024

APPLICATIONS EMAILED AFTER JUNE 1, 2024WILL BE INELIGIBLE, AS WILL INCOMPLETE APPLICATIONS

Name				
Address	City		State	Zip
Home Phone	Cell Phone	Email		
County	Date of Birth			
High School		Anticipated (Graduation 1	Date:
School Address (include Street, City, S	tate, Zip)			
Registrar & Phone Nu	mber			
Name of your local ne	wspaper publication			
Applicant, applica the NATURAL GAS company	ATION (IF APPLICABLI nt's parent, or applicant division of a FEPA Mem or Guardian	<u>'s grandparent m</u>	a FEPA Ve	
Email				
Employer				
Title				
Grandfa		Grandmo	ther	
Name				
Email				
Employer				
m: 1				

Please fill in current information about yourself and any siblings in your family in the space provided below. Also, if any other individual in your household will attend college this year and list the college.

Full Name	Age	Relationship to Student	College
1.			
2			
4. Check box if there are additi	onal family memb	pers not listed above and a	ttach a separate list.
ACADEMIC INFORMATIO	<u>N</u>		
High school class rank:			
High school class size:			
A.C.T. score:	_ S.A.T. (Verbal)	:	
S.A.T. (Math):			
List separately S.A.T. II or Adva applicable):			•
High school G.P.A.:			
Academic Honors received (awarecords:	ards, prizes or dist	tinctions). Please include	applicable year

EDUCATIONAL PLANS

Which college, university, or trade school d	o you intend to attend?
Major	Term to be enrolled
What are your plans to continue your educa	ntion?
What are your career goals?	
PREVIOUS WORK EXPERIENCE	
	eviously held (attach additional page if necessary).
ACTIVITIES	
List any extra-curricular groups, organizati school in which you have participated or ho	ons, student government, or other activities at onors you have received.
List any involvement in community activities	es and/or work experience.
GENERAL	
	ded a scholarship (attach an additional page if

FINANCIAL INFORMATION

Combined Family income (including both parents/guardians):
\$0 - \$50,000\$50,000 - \$100,000more than \$100,000
Have you completed the Free Application for Federal Student Aid (FAFSA) for the upcoming term?
YesNo
If you answered "yes" above please attach a copy of your completed FAFSA application to this application form. If you answered "no" please complete a FAFSA application and attach a copy of it to this application form. List any other financial assistance for which you have applied or plan to apply.

SIGNATURE AND CERTIFICATION

I certify that none of the information provided on withheld any pertinent information. I will use sch only. I give permission for information to be give may recommend eligible recipients.	olarship funds for educational purposes
Signature of Applicant	Date
ACADEMIC INFORMATION SECTION NOTE: All current students must have this registrar and returned with their application	
(Please print clearly)	
I certify	is enrolled for hours for
theterm, 20, and 1	has a GPA of out of
at	, and is in (High
School) good standing in accordance with current	institutional policies.
A copy of the student's most recent transcr with this application.	ipt/semester grades must be included
Signature/Title (Please print clearly)	Date
Once completed, Email the scholarship application on or before, June 1, 2024 to:	Tina Ward
application of before, June 1, 2024 to:	tina@wilsonmgmt.com

FEPA SCHOLARSHIP FUND USE ONLY

Application No:	
Education History First Enrollment Date:	
Last Enrollment Date:	Last Term GPA:
Cumulative GPA:	Notified:
Accepted:	
Previous FEPA Scholarship Recipient, Year(s)	