

Home Builders Foundation of Western Massachusetts

2021
\$750 Tool Acquisition Award
or
\$750 Educational Scholarship

Presented By



Home Builders Foundation of Western Massachusetts

240 Cadwell Drive
Springfield, MA 01104
413.733.3126 Fax 413.781.8416
Email: aneely@hbrawm.com

\$750 Tool Acquisition or \$750 Educational Scholarship Application
(Please print or type)

Applicant:

Please submit this application completed and signed to your guidance department.

Deadline for all materials to be received at the office of the Home Builders & Remodelers Association of Western Massachusetts is 5 p.m. on Friday, May 7, 2021. **NO Exceptions.**

Personal Data

Full Name: _____

Street Address: _____

City, State, Zip: _____

Telephone: _____ Email: _____

Name of Parent or Guardian: _____

High School Attended: _____ Year of Graduation: _____

If you are applying for a \$750.00 Tool Acquisition Award, please complete the following:

Name of Employer: _____ Start Date: _____

Name of Company: _____ Telephone: _____

Your Job Description: _____

If you are applying for a \$750.00 Educational Scholarship, please complete the following:

Name of College or Training Program: _____

Starting Date: _____ Field of Pursuit: _____

Would you like to interview with a HBRAWM Member Company that is skilled in your trade? YES NO
(please circle your answer)

Evaluation process:

1. All information must be complete with instructions followed or application will not be accepted.
2. This scholarship is awarded to a student who is pursuing work with local residential trades people/and or small businesses in our area or pursuing a college education in the building industry or related fields.

Please sign the following statement:

All of the information I have provided is accurate. I give the Home Builders & Remodelers Association of Western Massachusetts (HBRAWM) permission to contact my school to provide additional information or to attest to any of the information contained herein. I understand that if I fail to complete my first semester for other than medical or personal reasons, or in the event of any misrepresentation in my application materials, I agree to reimburse the Foundation for any award given. If I am a scholarship recipient, I grant permission to the HBRAWM to use my name and photo in a press release. I also agree to attend the HBRAWM scholarship ceremony to receive my award. I understand that if I do not attend the Award ceremony, I forfeit my scholarship.

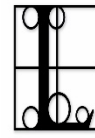
Signature of Applicant _____ Date _____

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A Special Thank You To Our Scholarship Ceremony Sponsors



F.W. WEBB COMPANY



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CONSTRUCTION INC.

The Responsible Building Professionals



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