Society of Allied Weight Engineers, Inc.

Requested Information for SAWE Scholarship Application

Aerospace • Marine • Offshore • Land • Allied Industries

The following screenshots show the information you will need to provide to successfully complete the SAWE scholarship application submittal process. Note that items highlighted with an asterisk (*) are required fields. We are unable to allow you to save and return to the forms at this time, so it is recommended that you gather this information prior to beginning the online submittal process.

Applicant Data

Applicant Name *

First   Middle   Last

Applicant Address *

Address Line 1

Address Line 2

City   State / Province / Region

Postal Code   Afghanistan ⌄   Country

Scholarship Applicant Email *

Applicant Phone *

▆ ▾   555-555-5555

Applicant Date of Birth *

DD ⌄ / MM ⌄ / YYYY ⌄

Next

College or University Information

Name of College or University You Are Currently Attending *

[   ]

Address *

[   ]
Address Line 1

[   ]   [   ]
City   State / Province / Region

[   ]   [Afghanistan   ⌄]
Postal Code   Country

4 Year College or University? *

☐ Yes

☐ No

Please Explain if Other than 4 Year College or University

[   ]

Year in School Next Year *

[1st   ⌄]

Overall G.P.A. *

[   ]

Major or Course of Study You Plan to Pursue *

[   ]

When Do You Expect to Complete the Program/Graduate? *

[   ]

What Certificate/Degrees Will you Earn by that Date? *

[   ]

[Next]

Work Experience

Describe any post-high school employment or military experience you may have had. If space provided in any section is inadequate, you may upload additional information. Attachments must follow the same format. Your name, address and name of this scholarship program should be included on all attachments, if needed.

Employer/Position 1

Employer/Position 1 Start Date

Employer/Position 1 End Date

Employer/Position 1 Hours per Week

Employer/Position 1: Were you paid for your work?

Yes ▾

Employer/Position 2

Employer/Position 2 Start Date

Employer/Position 2 End Date

Employer/Position 2 Hours per Week

Employer/Position 2: Were you paid for your work?

Yes ▾

Employer/Position 3

Employer/Position 3 Start Date

Employer/Position 3 End Date

Employer/Position 3 Hours per Week

Employer/Position 3: Were you paid for your work?

Yes ▾

Please upload additional work experience as needed, following the same format.

📥

Click or drag a file to this area to upload.

Allowed File Extensions: PDF, DOCX, XLSX, TXT

Next

ACTIVITIES, AWARDS AND HONORS

List all extracurricular activities in which you have participated during college (e.g., student government, music, sports, clubs and societies, etc.). Note all special awards, honors and offices held, including those of the military. Include dates of participation and honors/awards bestowed. If space provided in any section is inadequate, you may upload additional information. Attachments must follow the same format. Your name, address and name of this scholarship program should be included on all attachments, if needed.

Activity 1

Activity 1: Number of Months of Participation

Activity 1: Special Award, Honors

Activity 1: Offices Held

Activity 2

Activity 2: Number of Months of Participation

Activity 2: Special Award, Honors

Activity 2: Offices Held

Activity 3

Activity 3: Number of Months of Participation

Activity 3: Special Award, Honors

Activity 3: Offices Held

Please upload additional activities, awards and honors as needed as needed, following the same format.

Click or drag a file to this area to upload.

Allowed File Extensions: PDF, DOCX, XLSX, TXT

Next

GOALS AND ASPIRATIONS

Make a brief statement or summary (the equivalent of a page) of your plans as they relate to your educational and career objectives and long-term goals. Special consideration will be given to mass properties engineering.

Statement of Goals *

ACADEMIC INFORMATION (REQUIRED)

School Transcripts

Click or drag a file to this area to upload.

Attach current official college transcript(s). If your school requires transcripts to be mailed directly, send to scholarship@sawe.org.

Current Resume *

Click or drag a file to this area to upload.

Attach current 1-page resume.

APPLICANT EVALUATIONS

Please provide names and emails of 2 character references to provide an evaluation of your eligibility for this scholarship. The SAWE Scholarship Committee will send your 2 evaluators the required SAWE link and a request on your behalf. However, please let them know of your request for an evaluation.

Applicant Evaluator #1 *

First   Last

Applicant Evaluator #1 Email *

Applicant Evaluator #2 *

First   Last

Applicant Evaluator #2 Email *

Next

APPLICATION CHECKLIST

The student is responsible for submitting all materials on time. Incomplete applications will not be evaluated. This application becomes complete and valid only when all of the following materials have been received.

Need to Submit:

☐ Student Application

☐ Current Complete Transcript(s) of Grades or Request to School(s) for Same

☐ Current Resume

☐ Two Evaluator Names

NOTE: English translations are required for all non-English documents.

CERTIFICATION

I acknowledge decisions are final. I certify I meet the basic eligibility requirements of the program as described in the guidelines and the information is complete and accurate to the best of my knowledge. If requested, I will provide proof of information; falsification of information may result in termination of any award granted.

Applicant's Signature *

Please type in your legal name.

Today's Date *

Please type in the date of submittal of application.

Submit