



# Society of Vacuum Coaters Foundation, Inc.

P.O. Box 10202, Albuquerque, NM 87184-0202

[svcfoundation@svc.org](mailto:svcfoundation@svc.org)

## ACADEMIC SCHOLARSHIP FORM

This form is for the “ACADEMIC Scholarship” of the SVC Foundation to support enterprising students who have interest in furthering their education in the field of vacuum coating technology. Preference is given to students studying fields related to vacuum coating technology. Awards will be announced in January and will be given in-full within 60 days after the award announcement.

### Eligibility:

You must be enrolled in a course of study related to vacuum coating technology and remain a student during the Spring semester of the year the award is granted.

### How to apply:

To be considered for the SVC Foundation ACADEMIC SCHOLARSHIP you must:

1. Complete and sign the application form (this form).
2. Submit at least 1 recommendation Form from a professor at your educational institution.
3. Send all documents to the SVC Foundation (E-mail: [svcfoundation@svc.org](mailto:svcfoundation@svc.org)) no later than **OCTOBER 15<sup>th</sup>**.

While not required, it is also helpful to submit your current Transcript.

### PART 1: IDENTIFICATION OF APPLICANT (preferred address):

FULL NAME:	TELEPHONE:
MAILING ADDRESS (include city/state/country):	E-MAIL ADDRESS:
	COUNTRY OF CITIZENSHIP:



# ACADEMIC SCHOLARSHIP

## PART 2: APPLICANT'S CURRENT COURSE OF STUDY/INSTITUTION:

NAME OF EDUCATIONAL INSTITUTION:		EDUCATIONAL INSTITUTION COUNTRY:
EDUCATIONAL INSTITUTION ADDRESS: (include city/state/country)		FINANCIAL AID OFFICE CONTACT DETAILS: (include phone and e-mail)
MAJOR:	MINOR:	DEGREE:
CURRENT GPA (include scale):		EXPECTED GRADUATION DATE:

## PART 3: APPLICANT'S EDUCATIONAL HISTORY:

\*please list all colleges (undergraduate and graduate) you have attended

School Name / Location	Years Attended	Major	Degree Awarded	Grade Average



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## **PART 4: APPLICANT'S EMPLOYMENT EXPERIENCE:**

\*please list your work experiences

Employer	Dates	Describe Position/ Work Experience



## **PART 5: PERSONAL STATEMENT:**

Please describe any of the following that you feel help with your application:

- How your course of study is related and important to vacuum coating technology.
- Your personal interest in vacuum coating technology.
- How you have used vacuum coating technology.
- Your career plans and long-range aspirations.
- Special achievements/honors and interdisciplinary skills/interests.
- Your Social Values.

\*It is acceptable to use a separate document and attach to your application if the form below is not working or not adequate size to complete your write-up.



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## **PART 6: FINANCIAL AID NEEDED:**

Please describe the amount of financial aid desired and how this scholarship will aid you in your academic goals.

TOTAL \$ AMOUNT (REQUESTED):	DESCRIPTION OF EXPENSES:
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HOW SCHOLARSHIP WILL AID YOUR ACADMEMIC GOALS:
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# ACADEMIC SCHOLARSHIP

## PART 7: DESCRIPTION OF FINANCIAL NEED:

This section assesses your current financial situation. Please complete all sections and mark "N/A" for any section that does not apply.

<b>INCOME</b>	<b>EXPENSES</b>
STUDENT INCOME:	TUITION PER YEAR (2 SEMESTERS):
SPOUSE INCOME:	HOUSING COSTS:
PARENT(S) CONTRIBUTION:	BOOKS:
<b>Other Financial Aid</b>	<b>Other Expenses (please detail)</b>
LOANS:	
GRANTS:	
OTHER:	
<u>TOTAL INCOME</u>	<u>TOTAL EXPENSES</u>

<b>ASSETS*</b>	<b>LIABILITIES*</b>
*if married, include assets & liabilities of spouse	
CASH:	LOANS/NOTES:
SAVINGS ACCOUNT(S):	MORTGAGES:
CHECKING ACCOUNT(S):	CREDIT CARD DEBT:
REAL ESTATE:	OTHER (please detail):
INVESTMENTS:	
OTHER (please detail):	
<u>TOTAL ASSETS</u>	<u>TOTAL LIABILITIES</u>



<b>PERSONAL CIRCUMSTANCES</b>	
NAME OF SPOUSE:	SCHOOL SPOUSE ATTENDING?
	COURSE OF STUDY AND WHEN DEGREE EXPECTED:

### Information about your children and dependents

NAME:	AGE:	RESPONSIBILITY FOR SUPPORT? *if not responsible for 100% of support, list %

### **PART 8: CERTIFICATION:**

I certify that to the best of my knowledge the information provided in this application is correct. I further certify that I intend to complete the semester(s) to which this application would apply. I understand that any false statement on this application or my failure to complete a semester for which I have been provided aid may result in the revocation of my scholarship award and my repayment of any funds received.

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Signature

Date



## PART 9: FINANCIAL INFORMATION OF PARENTS:

\*not required if student is classified as “independent” without the support of his/her parents by the educational institution the student is attending.

### PARENTS/GUARDIANS INCOME

	Prior Year	Current Year Estimate
Taxable Income (Adjusted Gross):		
Nontaxable Income (Social Security/Other)		
Total Income:		

### FINANCIAL ASSISTANCE PROVIDED BY PARENT

Financial Assistance Provided to Student to Date:	
Financial Assistance Planned for Student for Next School Year:	

### EXPENSES FOR ADDITIONAL DEPENDENTS

NAME:	AGE:	SCHOOL ATTENDING:	SCHOOL EXPENSES:

### Parents/Guardians Certification

We certify that we have read our dependent’s application and to the best of our knowledge the information provided is true and correct:

Parent/Guardian #1 Signature & Date

Parent/Guardian #2 Signature & Date





# ACADEMIC SCHOLARSHIP

## REFERENCE SHEET - Page 1 of 2 (copy as many as needed):

Name of Applicant:

Name of Reference:

Address:

Phone:

E-Mail:

What is your relationship to applicant?

How long have you known the scholarship applicant?

### EVALUATION:

In comparison with a representative group of other students who have approximately the same amount of experience and training, how do you rate the applicant in:

	Excellent (upper 5%)	Very Good (upper 10%)	Good (upper 25%)	Average (above 50%)	< Average (lower 50%)
General academic ability					
Motivation and Initiative					
Social and Ethical Consciousness					
Potential to succeed in vacuum coating technology related field					



# ACADEMIC SCHOLARSHIP

## REFERENCE SHEET - Page 2 of 2:

### COMMENTS:

Please comment on any aspect of the applicant's background, experiences, community involvement, etc. that you feel will help the scholarship committee evaluate this individual.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Reference Form can be sent directly to the SVC Foundation ([svcfoundation@svc.org](mailto:svcfoundation@svc.org))

Scholarship deadline: OCTOBER 16, 2020