

TYPE OR PRINT ALL INFORMATION EXCEPT SIGNATURES

Completeness and neatness ensure your application will be reviewed properly.

Application postmark deadline May 1

FOR SCHOLARSHIP AMERICA USE ONLY

I.D. #	AA	PD	RIC/CS	GPA	SATRW	SATM	ACTC	SP1	TOTAL

APPLICANT DATA

Last Name _____ First _____ Middle Initial _____
 Permanent Home _____
 Mailing Address _____ Apartment # _____
 City _____ State _____ ZIP Code _____
 Phone (_____) _____ Date of Birth: Month _____ Day _____ Year _____
 Email Address (Required for notification) _____
 I am a U.S. Citizen or Legal Resident: Yes No
 Please indicate your status. (For statistical purposes only) Male Female
 American Indian/Alaska Native Black/African American Multi-Racial White
 Asian Hispanic/Latino Native Hawaiian/Pacific Islander

EMPLOYEE or EMPLOYEE PARENT/ GUARDIAN INFORMATION

Last Name _____ First _____ Middle Initial _____
 Employee ID Number _____ Date of Hire: Month _____ Day _____ Year _____
 Email Address _____
 Job Title _____ Department _____
 Service Line: Advanced Technologies Bottom Line Precision Pipeline MasTec Corporate/Essential Services
 MasTec Network Solutions Pumpco Utility Services Group Mastec Renewable Construction Co.
 Wanzek Construction Other _____
 City _____ State _____
 The applicant is an employee of MasTec Yes No The applicant is a dependent of the MasTec employee Yes No
 Relationship to Applicant _____
 My other parent is employed by MasTec Yes No If Yes, provide name of parent _____

HIGH SCHOOL DATA

School Name _____ High School Graduation Date: Month _____ Year _____
 City _____ State _____ Phone (_____) _____

POST-SECONDARY SCHOOL DATA

Name of postsecondary school you plan to attend. (If unknown, please list in order of preference the schools to which you have applied.)
Use official school names. Do not use abbreviations.
 _____ City _____ State _____
 _____ City _____ State _____
 4 yr. College or University 2 yr. Community or Junior College Other, explain _____
 Year in school **next** year: 1 2 3 4 5 I will be enrolled: Full-time Part-time
 Major or course of study _____ Expected college graduation date: Month _____ Year _____
 Degree sought: Bachelor Associate Certificate Other, explain _____

Sending a resumé does not replace any part of this application. If space provided in any section is inadequate, you may continue on additional sheets. Attachments must follow the same format. DO NOT repeat information already reported on the application form. Your name, address and name of this scholarship program should be included on all attachments.

WORK EXPERIENCE

Describe your work experience during the **past four years** (e.g., food server, babysitting, lawn mowing, office work). Indicate dates of employment for each job and approximate **number of hours worked** each week.

Employer/Position	From - Mo/Yr	To - Mo/Yr	Hours per Week	Were you paid for your work?
				YES / NO
				YES / NO
				YES / NO
				YES / NO
				YES / NO
				YES / NO
				YES / NO

ACTIVITIES, AWARDS AND HONORS

List all activities in which you have participated during the **past four years** (e.g., student government, music, sports, etc.). List all community activities in which you have participated without pay during the **past four years** (e.g., Boy/Girl Scouts, hospital volunteer, Special Olympics). Note all special awards, honors and offices held.

Activity	No. of Years Partic.	Special Awards, Honors	Offices Held	Activity	No. of Years Partic.	Special Awards, Honors	Offices Held

GOALS AND ASPIRATIONS

Make a brief statement or summary of your plans as they relate to your educational and career objectives and long-term goals.

UNUSUAL CIRCUMSTANCES

Please describe how and when any unusual family or personal circumstances have affected your achievement in school, work experience, or your participation in school and community activities.

COMPLETE ONLY ONE OF THE FORMS BELOW BASED ON THE APPLICANT

CHILD OF EMPLOYEE APPLICANT MUST HAVE THIS FORM COMPLETED.

APPLICANT APPRAISAL (required) Child of the Employee

To the Applicant: This section is **required** if the student applicant is the **dependent child of the MasTec employee** and must be completed in the format provided. If incomplete, your application will not be evaluated. The section is to be completed by a high school or college counselor or advisor, an instructor, or a work supervisor who knows you well.

To the Adult Appraiser: *You have been asked to provide information in support of this application. Please give immediate and serious attention to the following statements. When complete, please return to applicant. If you prefer, photocopy this section and return to applicant in a sealed envelope. A letter of recommendation does not replace this section.*

The applicant's choice of a postsecondary educational program is	<input type="checkbox"/> extremely appropriate	<input type="checkbox"/> very appropriate	<input type="checkbox"/> moderately appropriate	<input type="checkbox"/> inappropriate
The applicant's achievements reflect his/her ability	<input type="checkbox"/> extremely well	<input type="checkbox"/> very well	<input type="checkbox"/> moderately well	<input type="checkbox"/> not well
The applicant's ability to set realistic and attainable goals is	<input type="checkbox"/> excellent	<input type="checkbox"/> good	<input type="checkbox"/> fair	<input type="checkbox"/> poor
The quality of the applicant's commitment to school and/or community is	<input type="checkbox"/> excellent	<input type="checkbox"/> good	<input type="checkbox"/> fair	<input type="checkbox"/> poor
The applicant is able to seek, find, and use learning resources	<input type="checkbox"/> extremely well	<input type="checkbox"/> very well	<input type="checkbox"/> moderately well	<input type="checkbox"/> not well
The applicant demonstrates curiosity and initiative	<input type="checkbox"/> extremely well	<input type="checkbox"/> very well	<input type="checkbox"/> moderately well	<input type="checkbox"/> not well
The applicant demonstrates good problem-solving skills, follows through, and completes tasks	<input type="checkbox"/> extremely well	<input type="checkbox"/> very well	<input type="checkbox"/> moderately well	<input type="checkbox"/> not well
The applicant's respect for self and others is	<input type="checkbox"/> excellent	<input type="checkbox"/> good	<input type="checkbox"/> fair	<input type="checkbox"/> poor

Comments: _____

Appraiser's Name _____ Title _____ Telephone (_____) _____
 Signature _____ Organization _____ Date _____

EMPLOYEE APPLICANT MUST HAVE THIS FORM COMPLETED BY YOUR WORK SUPERVISOR.

APPLICANT APPRAISAL (required) Employee

To the Applicant: This section is **required** if the student applicant is the **MasTec employee** and must be completed in the format provided. If incomplete, your application will not be evaluated.

A letter of recommendation must accompany this appraisal.

To the Adult Appraiser: *You have been asked to provide information in support of this application. Please rate this applicant on his or her demonstration of the attributes below. When complete, please return to applicant. If you prefer, photocopy this section and return to applicant in a sealed envelope. A letter of recommendation does not replace this section.*

Problem-solving and follow through	<input type="checkbox"/> excellent	<input type="checkbox"/> good	<input type="checkbox"/> average	<input type="checkbox"/> below average	<input type="checkbox"/> no ability to judge
Work performance	<input type="checkbox"/> excellent	<input type="checkbox"/> good	<input type="checkbox"/> average	<input type="checkbox"/> below average	<input type="checkbox"/> no ability to judge
Applicant's choice of a postsecondary educational program is	<input type="checkbox"/> extremely appropriate	<input type="checkbox"/> very appropriate	<input type="checkbox"/> moderately appropriate	<input type="checkbox"/> inappropriate	<input type="checkbox"/> no ability to judge
Community involvement	<input type="checkbox"/> excellent	<input type="checkbox"/> good	<input type="checkbox"/> average	<input type="checkbox"/> below average	<input type="checkbox"/> no ability to judge
Leadership abilities	<input type="checkbox"/> excellent	<input type="checkbox"/> good	<input type="checkbox"/> average	<input type="checkbox"/> below average	<input type="checkbox"/> no ability to judge
Character and integrity	<input type="checkbox"/> excellent	<input type="checkbox"/> good	<input type="checkbox"/> average	<input type="checkbox"/> below average	<input type="checkbox"/> no ability to judge
Initiative	<input type="checkbox"/> excellent	<input type="checkbox"/> good	<input type="checkbox"/> average	<input type="checkbox"/> below average	<input type="checkbox"/> no ability to judge
Self-discipline	<input type="checkbox"/> excellent	<input type="checkbox"/> good	<input type="checkbox"/> average	<input type="checkbox"/> below average	<input type="checkbox"/> no ability to judge

Comments: _____

Appraiser's Name _____ Title _____ Telephone (_____) _____
 Signature _____ Organization _____ Date _____

TRANSCRIPT INFORMATION

A complete transcript of grades **must** be sent with this application. Grade reports are not acceptable.

- 1. Students currently or previously enrolled in college or vocational-technical school must** include all college or vo-tech transcripts of grades from each school attended. Unofficial transcripts must display student name, school name, grade and credit hours earned for each course, and term in which each course was taken. (Completion of high school information below is not necessary.)
- 2. High school seniors and students who have completed less than one full quarter or semester** of postsecondary education **must** include a high school transcript of grades and have this section completed by the appropriate school official. **(A clear explanation of the high school's grading scale must also be submitted.)**

Applicant ranks _____ in a class of _____
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Cumulative Grade Point Average
Weighted: _____/4.0 scale
Unweighted: _____/4.0 scale

SAT	
Evidence-Based Reading & Writing	Math

ACT				
English	Math	Reading	Science	Composite

School Official's Signature _____ Date _____ Title _____ Telephone (_____) _____

School Official's Address: Street _____ City _____ State _____ ZIP Code _____

APPLICATION CHECKLIST

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

- Student Application with completed Applicant Appraisal
- Current Complete Transcript(s) of Grades (including grading scale)
- Supervisor Letter of Recommendation (Employees Only)

All materials, including transcript, must be addressed to:

MasTec Scholarship Program
 Scholarship America
 One Scholarship Way
 Saint Peter, MN 56082

Postmark deadline May 1

CERTIFICATION

Scholarship America has the sole responsibility for selecting recipients based on criteria as set forth in the program's description. This application becomes the property of Scholarship America. (It is recommended you keep a copy for your files.)

I acknowledge decisions are final. I certify I meet eligibility requirements of the program as described in the guidelines and the information provided is complete and accurate to the best of my knowledge. If requested, I will provide proof of information, including an official transcript of grades. Falsification of information may result in termination of any award granted.

Applicant's Signature _____ Date _____

Employee's Signature _____ Date _____