



ANS Columbia Section

ANS Scholarship Award Application

Columbia, SC Local Section Scholarship

Name (Last, First, Middle) _____

Date _____

Present Address _____

City _____

State _____ Zip Code _____

Home Phone () _____ E-Mail _____

Business/Cell Phone () _____ Citizenship _____

Birthdate _____

College or University _____

Department of School _____

Address _____

City _____

State _____ Zip Code _____

Your Status in the Coming Academic Year

Undergraduate

☐ Sophomore

☐ Junior

☐ Senior

Graduate

☐ M.S. Candidate

☐ Ph.D. Candidate

Permanent Resident Visa expiration date _____

National ANS Student Member ☐ Yes ☐ No

If National ANS Student Member please provide member id# _____

(Scholarships normally are awarded only to student section members if campus has a charter)

What ANS Organization is sponsoring your application? _____

Who is your contact in that organization? Please have that person write a letter of recommendation to the Scholarship Program.

ANS Sponsorship Contact Person

Department Chair for upcoming year

Name _____

Name _____

Address _____

Address _____

City _____ State _____ Zip Code _____ City _____ State _____ Zip Code _____

For what other scholarships are you applying? _____

Education and Training

Columbia, SC Local Section of American Nuclear Society

Deadline for Receipt of Application - June 1

Send completed application to ANSColumbiaSection@gmail.com

For attendant at a College, University, or Technical Institute, give the information requested for each undergraduate and graduate degree. If you did not receive a degree, but have some college training, please give dates in attendance and total hours completed. ALL OFFICIAL TRANSCRIPTS OF YOUR COLLEGE RECORD MUST BE INCLUDED OR SENT BY THE APPLICATION DEADLINE

School _____	School _____
Location _____	Location _____
Dates in Attendance _____	Dates in Attendance _____
Major _____	Major _____
GPA _____ Out of a possible _____	GPA _____ Out of a possible _____
Degree _____ Date _____	Degree _____ Date _____

SAT or ACT Scores _____

GRE Scores: _____ Verbal _____ (Quantitative) _____ (Advanced [Field])

Education and Training

List other schools (Secondary, Vocational), Specialized Military Service, and Apprenticeship Programs

School	City, State, Country	Attendance From To	Field of Study
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Academic Honors and Activities

List any academic or professional activities and offices held:

List any academic honors received: _____

EMPLOYMENT HISTORY

Account for all employment, including U.S. Military Service. Start with your most recent position and work backward. Indicate average number of hours per week for any position less than full time. Attach supplemental sheets, if necessary.

PRESENT OR LAST POSITION

Position _____ From _____ To _____

Name of Employer _____

Address _____

City _____

State _____ Zip Code _____

Your principal duties, accomplishments, and special equipment used: _____

Previous Positions

Position _____ From _____ To _____

Name of Employer _____

Address _____

City _____

State _____ Zip Code _____

Your principal duties, accomplishments, and special equipment used: _____

Previous Positions

Position _____

From _____

To _____

Name of Employer _____

Address _____

City _____

State _____

Zip Code _____

Your principal duties, accomplishments, and special equipment used: _____

Previous Positions

Position _____

From _____

To _____

Name of Employer _____

Address _____

City _____

State _____

Zip Code _____

Your principal duties, accomplishments, and special equipment used: _____

List three people (preferably supervisors and/or faculty members) who are familiar with your qualifications. Please have these people complete the enclosed reference forms and return to you in time to be included in your application.

Name	_____
Address	_____
Phone ()	_____ Association with you _____

This image shows a blank sheet of white paper with ten horizontal black lines, resembling notebook paper. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

Date: _____ Signature _____

Sponsorship / Nomination

Sponsorship/nomination for scholarship is made by an ANS organization i.e., an ANS Local Section, Plant Branch, Student Section, etc. to establish that the applicant is indeed a student and deserving of funds provided by ANS for the scholarship.

This letter should be submitted on the letterhead of the sponsoring organization.

You can find a list of ANS organizations with contact information at <http://www.ans.org/const/>



CONFIDENTIAL REFERENCE FORM

Applicant _____

(Last)

(First)

(Middle)

How long and in what association have you known the applicant? _____

In a group of 100 other Engineering and Science students of comparable age and experience, how would you rate the applicant with respect to the following personal characteristics:

	Below Average	Average	Above Average	Unusual	Outstanding
	Lowest 40	Middle 25	Next 20	Highest	15
Motivation toward a successful productive career					
Fertility of imagination; originality of thought					
Emotional stability and maturity					
Ability to work with others					
Self-reliance and independence					

Inadequate opportunity to observe

☐
☐
☐
☐
☐
☐

In a group of 100 other Engineering and Science students of comparable age and experience, how would you rate the applicant with respect to the following scientific capabilities:

	Below Average	Average	Above Average	Unusual	Outstanding
	Lowest 40	Middle 25	Next 20	Highest	15
Mastery of fundamental knowledge in major field					
Growth during total period observed					
Laboratory skill and technique					
Ability to communicate information (written/oral)					

Inadequate opportunity to observe

☐
☐
☐
☐
☐

In the space below, add any descriptive comment which will assist in providing a complete picture of the applicant's character, attitude, abilities and potential as an engineer or scientist. Please comment on the applicant's weak as well as strong points. (Use additional sheets if necessary.)

Signature _____ Date _____

Type or print name _____ Title _____

Address _____ Phone () _____

Advisor: Please return this completed reference form in a sealed envelope **to the student**