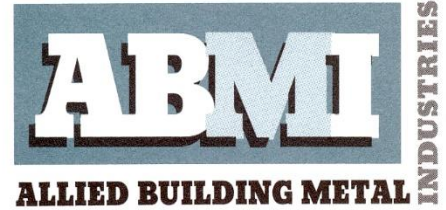


ALLIED BUILDING METAL INDUSTRIES, INC.
270 Madison Avenue, Suite 401
New York, New York 10016

Posted on www.alliedbuilding.org



**LARRY WEISS MEMORIAL
SCHOLARSHIP PROGRAM**

APPLICATION

DEADLINE: Interested candidates should submit their applications by no later than August 31. Thus, for academic year 2021-2022, applications would be due no later than August 31, 2021.

PLEASE CHECK ONE: INITIAL APPLICATION RENEWAL APPLICATION

INITIAL APPLICATIONS: PLEASE COMPLETE ALL SECTIONS

RENEWAL APPLICATIONS: PLEASE COMPLETE SECTIONS 1, 2, 5 and 6 ONLY

1. **APPLICANT**

Name: _____

Social Security Number: _____

Address: _____
(Street)

(City) (State) (Zip)

Email: _____

Date of Birth: _____

Telephone No.: _(____)_____

High School or College currently attending:

(Name)

(Street)

(City) (State) (Zip)

Telephone No.: (____)_____

Name of parent/guardian: _____

2. **FAMILY** (Complete either "a" or "b")

a) If you are the child (i) of an employee of a member of Allied Building Metal Industries, Inc., or (ii) of a contributing employer to the industry's advancement funds, please provide the following information for such parent:

Father Full name: _____

Occupation: _____

Employer: _____
(Name)

(Street)

(City) (State) (Zip)

Telephone No.: (_____)_____

Email: _____

Local Union (if applicable): _____

Number of years or months
employed with employer: _____
() Years () Months

Mother Full name: _____

Occupation: _____

Employer: _____
(Name)

(Street)

(City) (State) (Zip)

Telephone No.: (_____)_____

Email: _____

Local Union (if applicable): _____

Number of years or months
employed with employer: _____
() Years () Months

b) If you are a full-time employee of a member of Allied Building Metal Industries, Inc., or of a contributing employer to the industry's advancement funds (the Steel Institute of New York, Inc., or the Ornamental Metal Institute of New York, Inc.), please provide the following information:

Occupation: _____

Employer: _____
(Name)

(Street)

(City) (State) (Zip)

Telephone No.: (____) _____

Email: _____

Local Union (if applicable): _____

Number of years or months
employed with employer: _____
() Years () Months

3. **EDUCATION**

(Complete this section only if you are applying for an initial scholarship award)

For every high school/educational institution you have attended, please provide the following information, starting with the most recent:

Name of Institution	Address	Years Attended	Date and Type of Degree Attained

List any distinctions or honors you have attained, scholastic or otherwise:

List all extra-curricular activities:

4. **SCHOOL APPLICATIONS**

(Complete this section only if you are applying for an initial scholarship award)

For each school or educational institution to which you have applied for enrollment, please provide the following information:

Name of Institution	Address	Annual Tuition ¹	Financial Assistance

Name and address of institution you expect to attend:

Anticipated field of study (if none, state undecided): _____

5. **SCHOLARSHIPS**

Please list any and all scholarships you have received or expect to receive from any source:

Type/Name of Scholarship	Amount Received

¹ Please provide a statement of account or similar document from your institution's Bursar's Office confirming the amount of your annual tuition. Do not include costs for room, board, books etc.

6. **SCHOOL CURRENTLY ATTENDING**

(Complete this section only if you are applying to renew your scholarship OR if you are other than a graduating high school senior)

Please provide the following information regarding the school or educational institution in which you are presently enrolled:

Name of Institution	Address	Annual Tuition ²	Financial Assistance

****YOU MUST ALSO PROVIDE AN OFFICIAL TRANSCRIPT.**

List any distinctions or honors you have attained, scholastic or otherwise:

List all extra-curricular activities:

Field of study: _____

Expected Date of Graduation: _____

7. **ADDITIONAL INFORMATION**

(Complete this section only if you are applying for an initial scholarship award.)

The following information must accompany your scholarship application:

- a. OFFICIAL TRANSCRIPT of your High School/Educational Institution grades to date;
- b. Letter of Acceptance from Dean of Admissions of college/university/educational institution you plan to attend (if available at time application is made);
- c. College entrance board examination score (SAT, ACT); and
- d. Personal letter from you explaining your qualifications for the scholarship. Please include a statement regarding your educational goals.

² Please provide a statement of account or similar document from your institution's Bursar's Office confirming the amount of your annual tuition. Do not include costs for room, board, books etc.

8. **REFERENCES**

(Complete this section only if you are applying for an initial scholarship award.)

Your application will be considered incomplete until you have submitted three (3) letters of reference to the Selection Committee.

References will be provided by:

Name	Occupation	Address	Telephone No.

9. **SUBMISSION**

All applications and related documents required as part of your application shall be deemed properly submitted if: (a) delivered personally, (b) sent by email, which shall be effective upon receipt of such email, or (c) delivered by first-class mail or recognized overnight courier service, to the party set forth below:

ALLIED BUILDING METAL INDUSTRIES, INC.
c/o **Steven N. Davi**, Executive Director
270 Madison Avenue | Suite 401 | New York, NY 10016
T (212) 697-5551 | F (212) 818-0976 | C (516) 361-8211 | sdavi@alliedbuilding.org

I acknowledge and agree the Scholarship Committee reserves the right to interpret all rules and regulations regarding the Scholarship Program; any decision made by said Committee is final and irrevocable. I agree to be bound by the decision of the Committee which shall be considered final and binding.

Date: _____

Signature: _____