



CALIFORNIA/NEVADA/ARIZONA  
AUTOMOTIVE WHOLESALERS' ASSOCIATION

AUTOMOTIVE EDUCATION MEMORIAL FUND  
SCHOLARSHIP APPLICATION — 2008

We encourage you to apply on line at [www.automotivescholarships.org](http://www.automotivescholarships.org)  
for an opportunity to be considered for additional scholarships.

Scholarships Are Available to All CAWA Members, Employees and Interested Parties

**QUALIFICATIONS:** Applicants must be high school seniors or college under-graduates enrolled in a college level or vocational program pursuing a degree or accreditation. Priority will be given to curriculums in the order of (1) automotive aftermarket industry and (2) business. Applicant's permanent residence and/or school must be located in the states of California, Nevada, or Arizona.

**REQUIREMENTS:** Complete each section. Application must be accompanied by (1) **Letter of recommendation from your sponsor**, (2) **Current Official Transcript**, (3) **Head & shoulder photo (will be returned if you are not selected)**, (4) **Brief biography including long-term goals after college**.

**DEADLINE:** All materials must be postmarked by **March 31, 2008**. Incomplete applications will NOT be considered. Keep a copy for your records.

**APPLICANT INFORMATION**

Name: \_\_\_\_\_

Current Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZipCode: \_\_\_\_\_

Permanent or c/o Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZipCode: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax and/or Email: \_\_\_\_\_

**RELEASE STATEMENT:** I hereby give permission to the California/Nevada/Arizona Automotive Wholesalers' Association to use my name, biographical information and photograph in all forms and media for advertising, trade, and any other lawful purposes regarding my selection as a 2008 CAWA scholarship recipient. *(If applicant is under 18, parent must sign.)*

Signature of applicant or parent: \_\_\_\_\_

**SPONSOR INFORMATION**

(Sponsor can be either a CAWA member or School Instructor)

Name: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

Business/School Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax and/or Email: \_\_\_\_\_

**PLEASE ANSWER THE FOLLOWING QUESTIONS**  
(Attach additional sheets if necessary)

Date graduating/graduated from high school: \_\_\_\_\_

What institution are you attending or plan to attend? \_\_\_\_\_

What field of academic study are you planning to pursue? \_\_\_\_\_

Are you a graduate student?  Yes  No

Your highest educational goal:  BA  BS  Other \_\_\_\_\_

Will you be enrolled as a full-time student?  Yes  No

If yes, 2 year 4 year or ASE/NATEF Certified Voc-Tech institution (length of course \_\_\_\_\_)

What will this scholarship mean to you financially and/or otherwise?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Comment on how you have benefited or expect to benefit from your educational experience.

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\_\_\_\_\_  
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\_\_\_\_\_

In 100 words or less, why do you believe you deserve a scholarship from the Automotive Education Memorial Fund?

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\_\_\_\_\_  
\_\_\_\_\_

**PLEASE RETURN COMPLETED APPLICATION AND MATERIALS TO**  
**CAWA, 11160 Sun Center Dr., Rancho Cordova, CA 95670**  
**Phone: (916) 635-9774 Fax: (916) 635-9995 Email: [programs@cawa.org](mailto:programs@cawa.org)**