



Richard C. Martin Memorial Scholarship Fund Governing Rules and Regulations

This program is open to any dependent child of any Florida resident employee working full time for a producer or associate member company of FICAP.

1. All requests for scholarships must be presented on the Association's official application form.
2. Scholarships will be granted for accredited junior college, college, or university level. Special consideration will be given to students in concrete related studies, engineering, architectural, building construction or business programs in Florida or other selected schools.
3. Scholarship applications will be reviewed and graded – and granting of awards will be based on:
 - a. Grades or GPA
 - b. Financial Need
 - c. Presentation of Application – appearance, timeliness, completeness, etc.
 - d. Choice of Career or College Major
 - e. Quality of Essay
4. All applications for scholarships must be returned at the prescribed time in order to be eligible for consideration.
5. Scholarships will be granted for (1) year or two (2) consecutive semesters at a time. The student(s) who receives a scholarship will have to maintain his or her eligibility each year or semester period to continue to receive the scholarship. **Each request for additional scholarship funds must be accompanied with the student's last semester grades and next semester's class schedule.** It is the recipient's responsibility to provide this information and the FICAP office will not send a request.
6. Scholarships will be paid directly to the school for tuition, books, and fees up to the amount of the annual award.
7. Scholarships are permanent grants for the year and need not to be repaid.
8. Should a scholarship student be asked to leave by his or her school supervisors for misconduct or because of failing grades before the semester is over, and if the policy of the school is not to return that part of the tuition which has not been used, then the scholarship student will not be eligible for any further consideration until he or she repays the balance of the unused tuition to the Association.
9. Scholarships may be granted each year to the same student based on criteria listed in No. 4 as long as the student is successfully progressing toward his/her educational objective, as a full time student, not longer than five (5) years, and only as long as the student is a dependent of a *full time employee and only as long as the employment of the parent continues with a producer or associate member company of FICAP. At the discretion of the committee, we may adjust your scholarship amount and/or eligibility, if you change your stated major/educational objective.
**Exception: Scholarships may continue if the parent(s) retires from the member company during the time of the scholarship.*
10. A scholarship will be awarded annually to a student who meets the eligibility requirements listed above. The annual scholarship amount is up to \$5000.00. Students in their junior or senior year of college, and pursuing a career in the construction industry, are eligible for an increased amount of scholarship.



Dear Applicant:

To receive financial aid from the Florida Independent Concrete and Associated Products association, it is required that you:

1. Completely read the instructions and follow them carefully.
2. Complete all four (4) pages of this application.
3. Include an official transcript through your last semester with the application.
4. Return all pages. All questions must be answered – If not applicable, so indicate.
5. Attend college full time and maintain a satisfactory academic standing (GPA of least 3.0).
6. Keep the first page of this package for your future reference.

This application must be returned to one of the following addresses:

FICAP Scholarship Fund
PO Box 4075
Milton, FL 32572-4075

FICAP Online Application Form

michele@ficap.org

Applicants who are selected for a scholarship will receive a formal notice by mail.



Application for Scholarship

Please note: This application must include an official high school transcript through the last semester, a recent photograph of the applicant, the signature of their parent(s) or guardian and the guidance counselor or principal.

1. Name (Last, First, MI):
2. Home Address:
3. City, State, Zip Code:
4. Telephone:
5. Email Address:
6. Date of Birth:
7. Parent/Guardian Name(s):
8. Parent/Guardian Address:
9. Parent/Guardians Place of Employment:
(Must be an active FICAP Producer or Associate member company)
10. High School Attended:
11. Date of Expected Graduation:
12. High School Class Rank: out of
13. High School GPA (weighted):
14. ACT/SAT Score:
15. Career Choice/Objective:

16. Please describe your involvement in extra-curricular activities with your high school or in your community. Please include the type of activity, your leadership role, personal involvement, specific contributions, and any significant learning opportunities. Use separate paper is necessary.
17. Please describe any honors, recognition's or awards you have received. Use separate paper if necessary.
18. Please write a short essay (200 words maximum) explaining your desire and need for this scholarship, along with your interest in the concrete industry and any work experience you may have in the concrete industry. You may attach this separately.
19. I am aware that I must maintain an academic standing of average, or above average, and demonstrate acceptable standards of citizenship and character to be eligible for financial aid and to continue receiving that aid. I certify that the information on this form is true and correct to the best of my knowledge.

Acknowledge [yes/no]:



Family Financial Information

All questions must be answered. If an item is not applicable, so indicate. If additional space is needed, please use another sheet. All information will be held in strict confidence.

Relationship to Applicant: Father Stepfather Guardian

Name:

Home Address:

City: _____ State: _____ Zip: _____

Occupation:

Employed By: _____ Years Employed: _____

Retirement Provisions: Social Security Company Pension Other

Relationship to Applicant: Mother Stepmother Guardian

Name:

Home Address:

City: _____ State: _____ Zip: _____

Occupation:

Employed By: _____ Years Employed: _____

Retirement Provisions: Social Security Company Pension Other

Combined total annual income of parent(s) or guardian:

Under \$50,000 <input type="checkbox"/>	\$51,000-\$75,000 <input type="checkbox"/>	\$76,000-\$100,000 <input type="checkbox"/>
\$101,000-\$125,000 <input type="checkbox"/>	\$126,000-\$150,000 <input type="checkbox"/>	\$151,000 or more <input type="checkbox"/>

At this time, does the student have other financial aid or scholarships? No Yes If so, please list:

Financial Aid/Scholarship Award	Amount	Length of Award	Renewable?

Are there any other children who will be dependent upon you during the next four (4) years for their schooling financial aid, beyond high school? No Yes If so, please list:

Child's Name	Age	School they are now or will be attending	What years will they attend?	Aid you are or will be contributing	Scholarship aid they are or will be receiving

I certify that the information given on this application is correct to the best of my knowledge.

Date:

Signature: _____

Parent or guardian of applicant