



American Welding Society

Houston Section

SCHOLARSHIP APPLICATION FORM

Applicant Name: _____

Current Address: _____

City: _____ State: _____ Zip: _____

Home Ph: _____ Work Ph: _____ Cell Ph: _____

Social Security Number: _____ Date of Birth: _____

Proposed School: (Name of University, Technical School or Junior College):

School Address: _____

City: _____ State: _____ Zip: _____

Chosen Major Area of Study: _____

Starting Date: _____ Expected Graduation Date: _____

I affirm that the information I have provided on this application and the supporting material is complete, accurate and true to the best of my knowledge. I understand that furnishing false information may eliminate me from consideration for scholarship funds or lead to revocation of financial aid at some later date.

Applicant Signature: _____ Date: _____

Supporting Materials Attached:

- 200 Word Essay
- Most current School Transcript

Send All Documents to:

John Husfeld
Conformance Consulting Services
28023 FM 1488 Road
Hockley, TX 77447
832-876-6097