2018 SCHOLARSHIP APPLICATION

WESTERN EQUIPMENT DEALERS ASSOCIATION

Date:_____ Amount Applied for: $_____

This application is for a (**check one**):

❒ First time WEDA Scholarship ❒ WEDA Scholarship Renewal

DEALER INFORMATION (Please print):

Dealership Name: _____

Address: _____
(Street Address or PO Box Number) (City) (Province) (Postal Code)

Phone: (___) _____Fax: (___)_____ Email:_____

Dealer Principal: _____

STUDENT INFORMATION

Student Name: _____

Address: _____
(Street Address or PO Box Number) (City) (Province) (Postal Code)

Check One:

❒ Potential Employee training for the following department/position

_____

❒ Current Employee training for a different department.

Please explain: _____

_____

❒ Current Employee pursuing advancement within the same department

Please explain: _____

_____

(Continued)

SCHOOL INFORMATION

Educational program being pursued: _____

❒ 2 Year Program ❒ 4 Year Program ❒ Other

Scheduled Graduation Date: _____/_____
(Month) (Year)

School:_____

Address:_____
(Street Address or PO Box Number) (City) (Province) (Postal Code)

School Contact Person/Title: _____

Phone: (___)_____

Check One:

❒ As a first time scholarship applicant, I have attached verification that I have been accepted and am enrolled full-time in the education program listed above.

❒ As a scholarship renewal applicant, I have attached a progress report (including current marks) from my faculty advisor, dean or department chair.

DEALER STATEMENT: I understand that the WEDA Scholarship Program requires a matching dealer contribution in an amount of up to $1,000 and that I must be a current member of the Western Equipment Dealers Association to participate. If the above-mentioned applicant is granted a scholarship from WEDA, I understand that both Association and dealer contributions will be forwarded to the student to offset costs of tuition.

Dealer Signature:_____

STUDENT STATEMENT: I understand that this application is for tuition aid that requires a matching contribution from the dealer and that all funds will be used to offset the costs of tuition. I also understand that any breach in my enrollment or other unsatisfactory performance in my course of study will result in cessation of aid.

Student Signature:_____

Please forward application by Friday, April 27, 2018 to:
Education Committee
Western Equipment Dealers Association
2435 Pegasus Road N.E.
Calgary, Alberta T2E 8C3

WESTERN
Equipment Dealers Association

Please note: Do not send money with this application. When your scholarship has been approved, you will receive notice and instructions for submitting your portion of the scholarship.