

ACCO Memorial Fund Scholarship Application

INSTRUCTIONS

Complete entire form, enclose a copy of your most recent school transcript and mail to:

ACCO Scholarship Committee

8226 Stoney Brook Drive

Chagrin Falls, OH 44023

REQUIREMENTS: (must satisfy all requirements)

- A) Applicants must be an Ohio resident entering or currently enrolled in a school with course work related to:
 - i. the mechanical trades (heating, ventilation, air conditioning, refrigeration = HVACR),
 - ii. engineering, or
 - iii. business (provided applicant's goal is to use the training in the HVACR trade)
- B) Academic performance based on most recent school experience
 - must have graduated H.S. or be enrolled in a post H.S.education program with a minimum 2.0 GPA
- C) Evidence of interest in the trades [after school, summer or work-school experience)
- D) Recommendation from school and/or employer
- E) Sponsored by an ACCO member
- F) Authorize background check for previous convictions of DUI, drug use, or felony charges.

APPLICATION DEADLINE:

PLEASE PRINT ALL INFORMATION:

Must be postmarked by August 15, 2017 for consideration for the 2017 - 2018 school year.

EDUCATION

Previous high school, trade school or college experience:

Frevious high school, trade school	Grade		
SCHOOLS ATTENDED	DATES	Type of Degree	Point Average
1	/ to/		_
2	/ to/		
3	/ to/		

Applicant Name	Page 2 of
School you currently attend or plan to attend (for whi	ch the scholarship funds will be applied):
Name:	
ddress:City/State/Zip	
Present major / course of study:	
Projected graduation date:	<u></u>
Estimated cost of education for one year: Tuition \S	Books \$
Other: (please explain)	
PERSONAL	
Are you involved in any extracurricular activities or c	ommunity service? If yes, please explain:
We will consider financial need when awarding these would like us to take into consideration:	
Do you have any previous experience in the HVACR	industry? If yes, please explain:
In your own words, please state your career goals in	the HVACR industry:
To the best of my knowledge, all information furnished further authorize a background check.	ed in this application is correct. By my signature, I
Applicant's Signature:	
Sponsor: ACCO Member Company:	
Signature:	
Applicant's Relationship to Sponsor (if any)	Date://