

KEEVEN HEATING & COOLING

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Keeven HVAC Scholarship Guidelines

Keeven Heating and Cooling Inc. is pleased to announce the Keeven HVAC Scholarship.

The \$2,000.00 academic scholarship, awarded \$1,000.00 per academic year, will be give to a student pursuing an Associate of Applied Science Degree in the Heating Ventilation Air Conditioning Technology program at State Technical College of Missouri. In addition to fulfilling scholarship criteria, consideration is based on availability of funds.

Eligibility Requirements:

- Applicants should be enrolled as a first-year full time student (12 hours minimum per semester) pursuing an Associates of Applied Science Degree in the Heating Ventilation Air Conditioning Technology program at State Technical College of Missouri.

The scholarship is paid directly to the recipients account at State Technical College of Missouri in the fall semester upon the student's verified enrollment. The scholarship will be applied toward the academic costs associated with the 1st year and 2nd year.

This is a one time, annual scholarship awarded to a full time student attending State Technical College of Missouri. In the event a student is unable to fulfill the requirement of full-time enrollment for the fall semester following award of the scholarship, the scholarship will be transferred to the next available alternate.

This application is available on our website, www.kheatcool.com. Please take time to fill out our application in its entirety and submit to the address below or email to lois@kheatcool.com.

Keeven Heating and Cooling
Keeven HVAC Scholarship
555 Keeven Lane
New Haven, MO 63068

Application Deadline
May 15, 2017

Keeven HVAC Scholarship Application

Incomplete applications will automatically be ineligible for consideration. To be complete all pages of this application must be submitted with the requested information. Please print clearly with dark ink. Application deadline: May 15, 2017.

A. Applicant's Information:

Full Name: _____
Last First Middle

Address: _____

City: _____ State: _____ Zip: _____

Telephone Numbers: _____
Home Cell

B. Education Information:

High School Name: _____

High School Address: _____

City: _____ State: _____ Zip: _____

Cumulative GPA: _____

Graduation Date: _____

C. Financial Information:

How are you financing your college tuition and expenses? Please directly address financial need and/or special circumstance, as they will be considered when awarding this scholarship.

D. Personal Goal Statement:

Provide a statement relative to you educational and vocational goals. You might include what your plans and aspiration are for the future, and what values you hold to be important to your development.

E. Extra-Curricular Activities:

Please list all school-related and community activities and organizations you have participated in, including offices held, honors received, and awards granted. Indicate length of membership or terms of service.

F. Work History:

Please list all full-time, part-time and/or summer jobs you have held. Include length of employment and job duties. Indicate what skills and abilities you have acquired through your employment.

G. Additional Information:

Please provide any additional information related to the scholarship criteria that you want the selection committee to consider when reviewing your application.

Please attach additional pages if needed.

H. Character References:

Please list two character references and their information below. We will contact them to gather information related to your scholastic ability, work habits, attitude and character. (Examples: teacher, pastor, employer, etc.)

Character Reference #1

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone Numbers: _____ Email Address: _____

Character Reference #2

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone Numbers: _____ Email Address: _____

I. Application Submittal:

By submitting this application, I certify that the information provided is true. I give my permission to let any scholarship committee member review this application. This permission will remain in effect until I have graduated from State Technical College of Missouri or until it is revoked in writing.

Applicant's Signature: _____

Date: _____

Mail/Email Completed Application:

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