

ANNOUNCEMENT OF WSFDA SCHOLARSHIPS

Each year, the Washington State Funeral Directors Association (WSFDA) awards scholarships to persons enrolling full-time in Mortuary College. The number and amount of the scholarships, if any, vary from year to year, the minimum amount being \$500.

Applicants will be evaluated on the basis of need, letters of recommendation, employer's statement, and aptitude for funeral service. Those awarded a WSFDA scholarship must matriculate within 18 months of the award. WSFDA, upon satisfactory evidence of acceptance and matriculation, will pay scholarship monies directly to the recipient's mortuary college.

The applicant must:

- (1) Be a high school graduate or have a GED;
- (2) Have completed the educational requirements set forth in the Revised Code of Washington (section 18.39); or plans to complete the two year associate degree at an approved school of Mortuary Science;
- (3) Have completed one year of apprenticeship in the State of Washington with a WSFDA member;
- (4) Be currently enrolled in an approved College of Mortuary Science or have been accepted at an approved College of Mortuary Science;

Scholarship applications must be filed at the WSFDA office by April of the current year. Scholarship recipients will be announced at the annual WSFDA Convention.

The Institution and persons writing letters of recommendation must send the following documents directly to WSFDA. (These will be kept confidential.)

- (1) A copy of college transcripts showing grades earned, and**
- (2) Three letters of recommendation from persons who are not funeral service colleagues of the applicant. The letters should be from persons with whom the applicant has had contact in his/her funeral service work. For example, a local pastor, hospice nurse, cemetery manager or a previous employer.**

In addition to the above requirements, applicants may be asked to appear before the WSFDA Scholarship Committee for a personal interview.

The completed application and all supporting documents are to be sent to:

WSFDA
Scholarship Committee
2115 South 56th Street, Suite 105
Tacoma, WA 98409

If you need further information, please call Jewell Steffensen at the WSFDA office 253-588-7111.

SCHOLARSHIP APPLICATION

SECTION I

Your full name Phone _____

Address (Street, City, Zip) _____

Father's name _____ Occupation _____

Mother's name _____ Occupation _____

Your date of birth _____ Place of birth _____ Sex _____

Are you a citizen of the United States? _____ Length of residence in State of Washington _____

Are you a licensed Funeral Director? _____ If so, in what state? _____

Are you a registered Apprentice Funeral Director? _____ If so, in what state? _____

Are you a registered Apprentice Embalmer? If so, in what state? _____

Are you a veteran? _____

Employment Record During Past Three Years

(List Name of Employer; Telephone No; Position Held)

List current civic or community activities

What mortuary college do you plan to attend? _____

How long is the program in which you intend to enroll? _____

Have you ever attended Mortuary College before? _____

If yes where? _____ For how long? _____

SCHOLARSHIP APPLICATION

SECTION III

Financial Statement

Please estimate your expenses, both educational and personal (living), during Mortuary College.

Please give the sources you have to meet these expenses and the amount of monies each source will provide.

Do you plan to work during Mortuary College? If so, for what portion of your expenses? _____

Applicant's Assets and Liabilities:

Savings _____

Other Assets _____

Liabilities (excluding car, credit card and college loan payments) _____

Car payments _____

Total credit card payments _____

College loans _____

I hereby declare, to the best of my knowledge, that the information given in this application is correct and true.

Signature of applicant

Date

SCHOLARSHIP APPLICATION

SECTION IV
Employer Certification

The following information must be submitted by the employer in a separate confidential statement and mailed directly to the Washington State Funeral Directors Association, Scholarship Committee, 2115 South 56th Street, Suite 105, Tacoma, WA 98409

Name of Applicant _____

Name of Funeral Home _____

Your Name _____ Your Position _____

Your Address _____

How long has the Applicant been employed by you? (Please specify dates of employment) _____

Position held by Applicant _____

If the Applicant is awarded a scholarship, do you plan on giving any additional financial assistance to the Applicant during Mortuary College? _____

If so, approximately how much total financial assistance will you give? _____

Do you think the Applicant represents a suitable choice to receive a Washington State Funeral Directors Association Memorial scholarship? _____

Please enclose a written recommendation regarding this Applicant, discussing his/her professional merits and likely contributions to funeral service.

Signature of Employer

Date