



**PROFESSIONAL CONSTRUCTION ESTIMATORS  
ASSOCIATION OF AMERICA, INC.  
PCEA-Orlando SCHOLARSHIP**

**Member Professional Advancement Scholarship**

*Remit to:*

**APPLICATION FORM FOR MEMBER  
PROFESSIONAL ADVANCEMENT SCHOLARSHIP  
SCHOLARSHIP COMMITTEE  
PCEA Scholarship Committee Board  
PO Box 1669  
Orlando, FL 32801-1669  
or Email to: [Kelly@GarciaPlace.com](mailto:Kelly@GarciaPlace.com)**

**Eligibility/Requirements:**

- Current member of PCEA Orlando Chapter Member
- Pursuing additional education or certification to advance career in construction industry

**Deadline:**

- Completed Application to be received by **February 1, 2024**

**Award:**

- The scholarship will be awarded based on the recommendation of the PCEA Scholarship Committee with the PCEA Board of Director final approval. The proposed recipient must prepare a letter of acknowledgement upon notification of award prior to a being issued a check.

## I. PERSONAL INFORMATION

A. Name:

First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

B. Contact:

Address: \_\_\_\_\_  
Number & Street City State ZIP

Telephone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

C. Member:

Occupation/Employer: \_\_\_\_\_

Occupation: \_\_\_\_\_

Years in Organization: \_\_\_\_\_

## IV. ADDITIONAL INFORMATION

A. Attach a separate commentary describing yourself and covering the following topics:

- Career Goals
- Reason for Requesting Scholarship
- Extracurricular Activities (community organizations, athletics, hobbies, etc... included positions held if any)

B. Character Recommendations - Attach letters of recommendation from individuals that have knowledge of you and your personal and work habits - Please include in these letters:

- Applicants Name
- Authors Name and Position
- Authors Connection to the Applicant

C. Attach a copy of current resume

*I agree that this application and all attachments may be used for the purpose of Evaluation and Selection by the Scholarship Committee of the PCEA and/or representatives designated by the Scholarship Committee*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please use an additional sheet to provide any other information that you feel is necessary to complete your application.