MASON CONTRACTORS ASSOCIATION OF HAWAII
SCHOLARSHIPS

The Mason Contractors Association of Hawaii will be awarding six (6) $3,000 scholarships to high school graduates from the State of Hawaii. The candidates must be entering or currently attending an accredited college or technical school in the State of Hawaii or the U.S. Mainland. The scholarships are intended to encourage Hawaii's youth to continue studying at an accredited 2-year or 4-year college or technical school.

APPLICATION DEADLINE: May 22, 2020  Scholarships will be awarded on June 19, 2020

Eligibility Criteria:
1. One parent must be a Hawaii resident and a member in good standing of one of the following organizations: Mason Contractors Association of Hawaii, Laborers' Union Local 368, SEAOH, ASCE or AIA Honolulu Chapter, Mason’s Union Local 630, Mason’s Union Local 1.
2. A member of the listed organizations or member's spouse is also eligible for the scholarship.
3. The candidate must be graduating or graduated from a Hawaii public or private high school and/or is undergraduate attending an accredited college or technical school in Hawaii or the U.S. Mainland.
4. Each applicant must submit a Student Aid Report from “FAFSA” (Free Application for Federal Student Aid). Scholarship applications without a Student Aid Report will be disqualified. Download application at https://fafsa.ed.gov/

Selection Criteria:
Academics, financial need, community involvement, special awards and honors including athletic achievement and other evidence of personal motivation and eagerness to learn are among the criteria for selection.

Instructions to Applicant:
1. Complete the application. Attach a certified copy of your high school transcript and/or your last college term transcript.

2. Two non-family members are required to complete both copies of the CONFIDENTIAL LETTERS OF RECOMMENDATION. At least one reference must be a staff member, counselor, instructor or professor of your school. The LETTERS OF RECOMMENDATION should be mailed to MCAH c/o Mr. Kent Wada, post marked by May 22, 2020.

3. Mail the application packet and LETTERS OF RECOMMENDATION to:
   MCAH Scholarship Committee
   c/o Mr. Kent Wada
   99-1219 Iwaena Street
   Aiea, Hawaii  96701

All information and documents submitted by the candidates will be kept confidential and will become a property of the MCAH committee.

If you have any questions, please call Rod Haraga at 808-782-8661
CANDIDATE’S APPLICATION FORM – Part 1

(Please type or print legibly)
Applicant Number _______ (for committee use only)

FULL NAME of APPLICANT

Applicant's Nickname (if applicable)

Date of Birth ___________________ Place of Birth ______________________

Home Address _______________________________________________________

City __________________________ Zip Code __________

Mailing Address __________________________ City __________ Zip Code __________

Residence Telephone Number __________________________

Father's Full Name ______________________________________________________

Father's Address if not same as above _______________________________________

Mother's Full Name ____________________________________________________

Mother's Address if not same as above _______________________________________

Parent's Present Marital Status: Married Widowed Divorced Separated

Guardian (if other than parent) _____________________________________________

Address __________________________ City __________ Zip Code __________

Applicant's Signature ___________________________ Date ________________

I hereby declare that I have read this application and that the information provided is correct and complete.

Parent's/Guardian's Signature ___________________________ Date ________________

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CANDIDATE’S APPLICATION FORM – Part 2

Applicant’s Name __________________________

APPLICANT’S PERSONAL FAMILY INFORMATION
All information will be kept confidential.

Father: Age _______ ( ) Living ( ) Deceased

Father's Occupation _____________________________________________________________

Father's Employer _____________________________________________________________

Father's group affiliation, if any _________________________________________________

Mother: Age _______ ( ) Living ( ) Deceased

Mother's Occupation _____________________________________________________________

Mother's Employer _____________________________________________________________

Mother's group affiliation, if any _________________________________________________

INDICATE WHAT GROUP YOU OR YOUR FAMILY IS AFFILIATED WITH:

□ Mason Contractors Association of Hawaii □ Structural Engineers Association of Hawaii

□ Honolulu Chapter – American Institute of Architects □ Laborer’s Union Local 368

□ American Society of Civil Engineers □ Mason’s Union Local 630 □ Mason’s Union Local 1

List all other children in family regardless of age (whether still dependent or not)

First Name Only Age Occupation (if student name school/grade)

_________________________ _______ __________________________

_________________________ _______ __________________________

_________________________ _______ __________________________

_________________________ _______ __________________________

Please indicate unusual financial obligations: ____________________________________________
### Applicant’s Name

Mason Contractors Assoc. of Hawaii Scholarships

**CANDIDATES APPLICATION FORM – Part 3**

<table>
<thead>
<tr>
<th>Applicant’s Name _________________________________</th>
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**APPLICANT'S SCHOOL INFORMATION**

<table>
<thead>
<tr>
<th>Name of High School/Current Institution</th>
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<tbody>
<tr>
<td>_______________________________________</td>
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<table>
<thead>
<tr>
<th>Date of Graduation ______________________________________________________________________</th>
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<table>
<thead>
<tr>
<th>Address __________ Zip Code_________</th>
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<td>____________________________________</td>
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<tr>
<th>Name of Principal ____________________________________________ Tel. ________________________</th>
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<tr>
<th>Name of Counselor _____________________________________________ Tel. ________________________</th>
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</table>

**POST-HIGH SCHOOL PLANS (For High School Seniors)**

Name in the order of preference the three post-high school institutions you would like to attend/attending

<table>
<thead>
<tr>
<th>Institute/Location</th>
<th>Accepted for Application</th>
<th>Admission Pending</th>
</tr>
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<tbody>
<tr>
<td>1. __________________</td>
<td>__________________________</td>
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<tr>
<td>2. __________________</td>
<td>__________________________</td>
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<tr>
<td>3. __________________</td>
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</table>

What field of study do you intend to pursue? __________________________________________________

**OTHER AID PROGRAMS**

Have you applied or intend to apply for other financial aid or scholarship programs? ( ) Yes ( ) No

If yes, please list them below:

<table>
<thead>
<tr>
<th>1. ___________________________________________________________________________________</th>
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<tr>
<td>2. ___________________________________________________________________________________</td>
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<tr>
<td>3. ___________________________________________________________________________________</td>
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</table>

**COLLEGE /TECHNICAL SCHOOL**

Name of Institution ___________________________ Field of Study___________________________

<table>
<thead>
<tr>
<th>ACADEMIC ACHIEVEMENT</th>
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<tbody>
<tr>
<td>APPLICANT’S GPA: ______________</td>
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<td>___________________________</td>
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SPECIAL RECOGNITION, AWARDS & HONORS

List special recognition, awards, and honors received and the appropriate grade year(s). List commendations not previously listed. Limit your response to the space provided — one entry per line.

<table>
<thead>
<tr>
<th>Commendations</th>
<th>Year</th>
<th>Group or Activity</th>
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SHORT ESSAY QUESTIONS

Select and respond to only one of the two questions below. Begin your essay by briefly explaining how you intend to utilize the scholarship funds towards furthering your education should you be the successful candidate. Continue your essay by answering the following question and answer it as completely as possible. Use additional sheet(s) if necessary.

Question 1:
What experiences in life have shaped you into the person you are today and what challenges have you overcome in achieving your education (i.e. financial, personal, medical, etc.)?

Question 2:
Explain who and how a person(s) has influenced your educational goals.

_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________

Use additional sheets, as necessary.
LETTERS OF RECOMMENDATION

Applicant’s Name _____________________________

Please give the names and addresses of two persons who have known you long enough to form a judgment of your personal qualities, achievements and academic abilities and have each submit a CONFIDENTIAL LETTER OF RECOMMENDATION on the attached form on your behalf by May 22, 2020.

At least one reference must be a staff member, counselor or an instructor at candidate's school. Reference letters should be mailed direct to the MCAH Scholarship c/o Kent Wada by the individual and not submitted with this application.

STUDENT ACTIVITIES, LEADERSHIP POSITIONS, ATHLETICS AND COMMUNITY INVOLVEMENT

List student activities in which you have participated and the approximate year(s). List leadership positions held and accomplishments and the appropriate year(s). Limit your response to the space provided — one entry per line.

<table>
<thead>
<tr>
<th>Student Activity</th>
<th>Leadership Position/Accomplishments</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Example: Student Council</td>
<td>Vice President</td>
<td>2018</td>
</tr>
<tr>
<td></td>
<td>President</td>
<td>2019</td>
</tr>
</tbody>
</table>

COMMUNITY INVOLVEMENT

List community activities during the appropriate grade level/year(s). Limit your responses to the space provided — one entry per line.

<table>
<thead>
<tr>
<th>Community Activities</th>
<th>Year</th>
<th>Level of Involvement</th>
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</table>
Mason Contractors Association of Hawaii – Scholarships
CONFIDENTIAL LETTER OF RECOMMENDATION – Part 4

Deadline: May 22, 2020 (post-marked)

Please fill out and mail directly to:
MCAH Scholarship Committee c/o
Kent Wada
Quality General Inc.
99-1219 Iwaena Street Aiea,
HI 96701

Applicant's Name: ____________________________________________________________

Last Name                                   First Name                                        Middle Initial

Applicant's School: ____________________________________________________________

Name of Reference: ______________________________________________________________________

Title/Relationship to Applicant: _____________________________________________________________

Address _______________________________________________________________________________

Daytime Phone _______________________________ Evening Phone ____________________________

This applicant is applying for one of six (6) $3,000 scholarships to support continued education at an accredited 2-year or 4-year college or technical school.

Selection criteria include academic achievements, financial need, community involvement, special awards and honors including athletic pursuits and other evidence of personal motivation and eagerness to learn.

Please describe your relationship to the applicant and your assessment of both the applicant's attributes and areas that need attention.

This statement is confidential and will not be released to the applicant or any other parties other than the Scholarship Selection Committee.

Please attach your response to this form and submit to our Selection Committee at the above address.

Your Signature ___________________________________________________________________________

Date _______________________________________

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Mason Contractors Association of Hawaii – Scholarships
CONFIDENTIAL LETTER OF RECOMMENDATION – Part 4

Deadline: May 22, 2020 (post-marked)

Please fill out and mail directly to:
MCAH Scholarship Committee c/o
Kent Wada
Quality General Inc.
99-1219 Iwaena Street Aiea,
HI 96701

Applicant's Name: ________________________________________________________________________

Last Name        First Name        Middle Initial
Applicant's School: _______________________________________________________________________

Name of Reference: _______________________________________________________________________

Title/Relationship to Applicant: _______________________________________________________________________

Address ______________________________________________________________________________________

Daytime Phone ___________________________ Evening Phone ________________________________

This applicant is applying for one of six (6) $3,000 scholarships to support continued education at an accredited 2-year or 4-year college or technical school.

Selection criteria include academic achievements, financial need, community involvement, special awards and honors including athletic pursuits, and other evidence of personal motivation and eagerness to learn.

Please describe your relationship to the applicant and your assessment of both the applicant's attributes and areas that need attention.

This statement is confidential and will not be released to the applicant or any other parties other than the Scholarship Selection Committee.

Please attach your response to this form and submit to our Selection Committee at the above address.

Your Signature ___________________________________________________________________________

Date _______________________________________

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