



2024 SCHOLARSHIP

PROGRAM APPLICATION

SCHOLARSHIP PROGRAM APPLICATION INSTRUCTIONS

2024 PROGRAM YEAR

Seeking to improve public health by creating a safer aquatic environment and by attracting more people to aquatic exercise through education and research, the Scholarship Program was founded to honor public swimming pool or spa operators who have pursued further education to better protect public health.

The following scholarship awards are available. Recipients of specific awards will be determined after reviewing all applications.

- Board Scholarship (2) \$2,000 Foundation Scholarship (up to 12) \$1,000

To be considered for a scholarship, the applicant must hold a CURRENT Pool & Hot Tub Alliance certification (CPO, CMS, CST, CSP, CHTT, CPI, CRP, CBP), be an ACTIVE instructor, or be an immediate family member of any of the above, and submit a completed application package.

SCHOLARSHIP APPLICATION PACKAGE REQUIREMENTS

Consideration will not be given to incomplete application packages.

- 1. A completed Scholarship Program Application.
- 2. A biographical sketch of the applicant (less than 300 words).
- 3. A complete resume or curriculum vitae of the applicant, including extracurricular activities, awards, etc.
- 4. A high-resolution digital photo of the applicant.
- 5. An essay of between three and five double-spaced, 12 pt. font, typed pages covering the following topic:
Imagine you've been granted \$25,000 annually for five years to establish a program in your community aimed at preventing drowning incidents, particularly among children. How would you utilize this funding to develop effective strategies for enhancing water safety awareness and practices? In your response, consider the various initiatives, policies, or programs that can be implemented to address this critical issue and promote a culture of water safety within your community.
- 6. Official academic transcript(s) from current academic institution and previous academic transcripts if applicant has been enrolled for less than two years.
- 7. For high school seniors or recent graduates, a copy of the applicant's most recent SAT or ACT scores.
- 8. Two letters of recommendation from teachers or college professors.

Deadline: To be considered for the 2024-2025 academic year, the complete application package must be received no later than Monday, September 16, 2024.

Award Notification: Award recipients will be notified on or before September 30, 2024. Upon award, payment will be submitted directly to the college or university. Awards cannot be paid directly to students. Only one scholarship per applicant will be awarded. Previous award recipients are ineligible for consideration.

APPLICATION PACKAGE SUBMISSION

Submit the entire application package in one (1) correspondence via post or email to the following:

PHTA Scholarship Program | 1650 King Street, Suite 602 | Alexandria, VA 22314 | awards@phta.org

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PROGRAM APPLICATION

Please review Scholarship Program Application Instructions for Complete Information on Application Requirements Please type all information

APPLICANT INFORMATION

Full Name of Applicant _____ Date of Birth _____

Home Address _____

City _____ State _____ Zip Code _____

Home Telephone _____

E-Mail Address (Home) _____ E-Mail Address (School) _____

Name of School _____

School Address _____

City _____ State _____ Zip Code _____

To which address should correspondence be sent? Home School

Applicant's Relationship to Certification Holder/Instructor _____

Intended Career Path _____

PARENTAL INFORMATION (for applicants under the age of 18)

Name of Parent/Guardian _____

EDUCATIONAL INFORMATION (applicants enrolled in a college or university do not need to complete high school information)

Name of High School _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Year of Graduation _____

Rank in Class _____ of _____ SAT / ACT _____ GPA (Weighted) _____

Name of College or University (Undergraduate) _____

Date of Entrance _____

GPA _____

Complete Address of College or University Financial Office Where Award Should be Sent¹

Declared Major/Minor (if applicable) _____

Anticipated Graduation Date and Degree _____

Applicant Signature² _____ Date _____

Parent/Guardian Signature³ _____ Date _____

SUBMIT FORM

PRINT FORM

¹ Award payment will be submitted directly to the college or university. Student assumes responsibility for obtaining accurate and complete information. Failure to do so may result in a delay or cancellation of funding.

² By signing, the applicant attests to the accuracy of the information, agrees to the terms and conditions of the program, and authorizes use of applicant's name, photograph, biographical information, and/or research information in publications and/or promotional information.

³ Parent/Guardian Signature is required for applicants under the age of 18.

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