

2019

**CLIFF LOVIN SCHOLARSHIP APPLICATION**

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_

E-mail Address \_\_\_\_\_

Are you a US Citizen?  Y  N  
(Please check one)

Please answer the following (add additional pages as needed):

- 1. List the Ohio college or university you are attending and what is your current major?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- 2. Summarize your educational background – highest degree attained, honors received, professional registrations, classes completed (if not on transcript) and currently taking, etc.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- 3. Summarize your educational goals – what degree or professional registration do you wish to attain, 4 year program, 24 hour survey credits, full time / part time student, etc.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- 4. Summarize your professional background – past employers, work experience.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- 5. Summarize your professional and career goals.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. **Provide other details such as community activities, financial information, or any other information pertinent to your application.**

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7. **If chosen to receive the Cliff Lovin Scholarship, will you be available to attend the closing awards luncheon at the 2019 Ohio GIS Conference in Columbus, Ohio on September 25th?**

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**Please attach an official transcript from any college level courses you have completed.**

**To the best of my knowledge, the information submitted on this application and the attachments is true and correct.**

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**Signature**

**Please return the completed application along with your supporting documentation by September 3, 2019 to:**

**Attention: Cliff Lovin Scholarship Committee  
c/o County Engineers Association of Ohio  
6500 Busch Blvd. Suite 100  
Columbus, OH 43229-1738**