



Dear Students:

It is our pleasure to announce that two scholarships will be awarded this year: The Empire State Energy Association Award and The Alan P. Savory Award. Scholarship Awards are open to all high school seniors who are children of ESEA members in good standing or who are children of employees of an ESEA member.

To be considered eligible, a member company must be the company specified in the ESEA membership application and not an associated, affiliated or otherwise related company or entity. Unless otherwise requested, these scholarship awards are paid directly to the accredited institution of higher learning to which the winning candidates have been accepted.

Enclosed is the application form with sections to be completed by the applicant, parent or guardian, and school counselor.

Please bear in mind that all application forms must be completed and returned to the ESEA office no later than May 19, 2017. If additional applications are required, please notify the ESEA office and we will be glad to forward them to you.

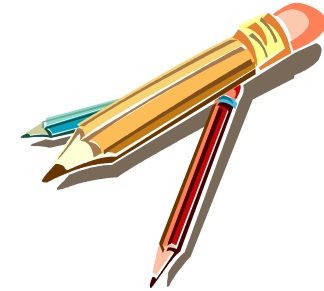
Sincerely,

Kris DeLair

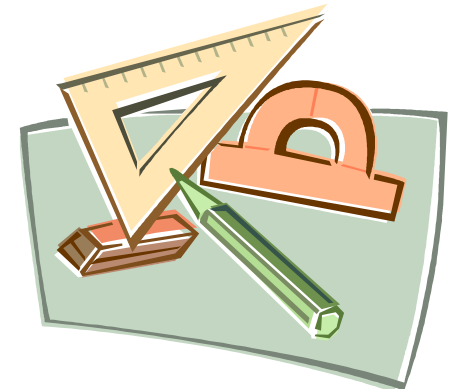
Kris DeLair
Administrative Director



2017



**ESEA
Scholarship
Program**





THE AWARDS



ALAN P. SAVORY
MEMORIAL
SCHOLARSHIP AWARD:
\$1,500

This was the first Scholarship Award. It was presented in 1968 and granted \$600 towards tuition, books and other materials at the college or university of the recipient's choice. In 1974, the award was increased to \$800 and renamed the Alan P. Savory Memorial Scholarship Award, in honor of the young ESPA leader who died unexpectedly while on vacation with his family. Mr. Savory had just completed two terms as President and Board Chairman a short time before his death. The current \$1,500 scholarship serves as a living memorial to Mr. Savory's leadership.



EMPIRE STATE ENERGY
ASSOCIATION
SCHOLARSHIP AWARD:
\$1,500

Since 1968, the Scholarship Award Program has been recognizing children of both association members and their employees for their academic excellence and citizenship. The current \$1,500 scholarship was presented in 2008 and recognizes a student who best represent these qualities.

THE ESEA SCHOLARSHIP AWARDS PROGRAM

ELIGIBILITY

Applicants to the ESEA Scholarship Program must be:

- Children of ESEA members or their employees. The Applicant's employer must be a Members in good standing for a minimum of one year as of the application deadline.
- High school seniors who will be enrolled in a full-time undergraduate course of study at an accredited public or private two or four-year college, university, or vocational-technical school.

APPLICATION

Interested students must complete the attached application and mail it along with a current transcript of grades to ESEA, postmarked no later than May 19, 2017.

Applicants are responsible for gathering and submitting all necessary information supplied; therefore, it is important to answer all questions as completely as possible. All information received is considered confidential and is reviewed only by the ESEA Scholarship Committee.

SELECTION OF RECIPIENTS

Scholarship recipients are selected on the basis of academic record, leadership, potential to succeed, participation in community and school activities, honors, work experience, a statement of education and career goals and an outside evaluation. Applicants will be notified in June whether they have been awarded a scholarship..

PAYMENT OF SCHOLARSHIPS

ESEA will pay scholarship awards no later than August. Checks will be mailed to recipient's college of choice or to their home address upon request.

OBLIGATIONS

Recipients have no obligation to ESEA or its participating members. They are, however, required to supply ESEA with current transcripts, if requested, and to notify ESEA of any changes of address, school enrollment or other relevant information. Except as described in this brochure, no obligation is assumed by ESEA or its member companies.

REVISIONS

ESEA reserves the right to review the conditions and procedures of this scholarship program and to make changes at any time including termination of the program. Previously approved scholarships will not be affected by subsequent changes in the program.



The 2017 ESEA Scholarship Awards Program Application



Please type or print all information except for signature. Attach sheets for additional information if needed.

Application Data

NAME: Last _____ First _____ MI _____

PERMANENT HOME MAILING ADDRESS: Address _____

City _____ State _____ Zip Code _____

DATE OF BIRTH: Month _____ Day _____ Year _____ Phone: (_____) _____

SOCIAL SECURITY #: _____

Employee Parent or Guardian Information

Last Name _____ First Name _____ MI _____

Job Title _____ Department _____ Length of Service _____

ESEA Member Company _____ City _____ State _____

Work Phone (_____) _____ Home Phone (_____) _____

Relationship to Applicant _____ The applicant is a dependent of the employee? Yes No

Number of children attending college in 2017-2018 including applicant: _____

High School Data

School Name _____ Graduation Date: Month _____ Year _____

City _____ State _____ Phone (_____) _____

Post Secondary School Data

Name of post-secondary school you plan to attend. If unknown, please list in order of preference the schools to which you have applied. Use official school names.

School Name _____ City _____ State _____

School Name _____ City _____ State _____

Type of Schools: 4 yr. College or University 2 yr. Community or Junior College
 Vocational-Technical Other, explain _____

Major Course of study _____ Anticipated date of graduation (Month) _____ (Year) _____

Student will: Live on campus Live off campus Commute from home
 If school choice is a public institution, applicant will pay: in-state resident tuition out-of-state tuition

Student's Financial Information



FINANCIAL AID:		ESTIMATED STUDENT'S COSTS:	
College Work-Study Program	\$ _____	Tuition & Fees	\$ _____
Other Campus Employment	\$ _____	Room & Board	\$ _____
Scholarships, Grants & Fellowships	\$ _____	Books & Supplies	\$ _____
NYSHEC (Tuition Assistance)	\$ _____	Personal Expenses	\$ _____
Funds from Other Sources	\$ _____	Transportation	\$ _____
TOTAL FINANCIAL AID:	\$ _____	TOTAL COSTS (Est.):	\$ _____

Work Experience



Describe your work experience during the past four years. Indicate dates of employment in each job and approximate number of hours worked each week. List amounts earned at each job.

Company/Position	From MO/YR.	To MO/YR.	Hours Per Week	Monthly Income

Activities Awards & Honors



List all school activities in which you have participated during the past four years (e.g.: student government, music, sports, etc.). List all community activities in which you have participated, without pay, during the past four years (e.g.: Boy/Girl Scouts, hospital volunteer, Special Olympics, etc.). Indicate all special awards, honors and offices held.

Activity	No. Yrs Partic.	Special Awards Honors	Offices Held	Activity	No. Yrs Partic.	Special Awards Honors	Offices Held



Empire State Energy Association

56 Clifton Country Rd., Suite 108, Clifton Park, NY 12065
(518) 280-6645 (Phone) (518) 280-6670 (Fax)
www.esesny.org



The 2017 ESEA Scholarship Awards Program Application



Please type or print all information except for signature. Attach sheets for additional information if needed.

Goals & Aspirations

Make a statement of your plans as they relate to your educational and career objectives and



Unusual Circumstances

Please make any comments or indicate any circumstances you would like to bring to the attention of the ESEA Scholarship Committee. _____

Teacher/Counselor/Supervisor/Evaluation

As his or her Guidance Counselor or Faculty Advisor, we would be grateful for any remarks you would care to make relative to the applicant's general attitude and citizenship. Of course, your comments will be considered strictly confidential and may be of material assistance in the furtherance of the applicant's continuing education. You may attach additional pages if you wish. _____

You have been asked to provide information in support of this application. Please give immediate attention to the following statements. When completed please return to applicant; or, photocopy this section and return to applicant in a sealed envelope.

Name of School: _____

Address: _____

Evaluator's Name: _____ Title: _____

Signature: _____

Transcript Information

Applicant must include a high school transcript of grades & have this section completed by the appropriate school official.

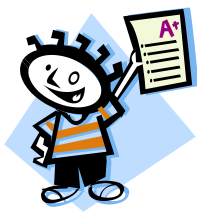
Applicant ranks _____ in a class of _____ Cumulative Grade Point Average _____ /4.0

PSAT Verbal _____ Math _____ SAT Verbal _____ Math _____ ACT Verbal _____

School Official's Signature _____ Date _____ Title _____ Phone (____) _____

School Official's Address _____

City _____ State _____ Zip _____



Application

This application for a scholarship becomes complete & valid only when you have returned all of the following materials:

- Student Application
- Current Transcript(s) of Grades to:

ESEA Memorial Scholarship Fund
56 Clifton Country Rd., Suite 108
Clifton Park, NY 12065

The student is responsible for submitting all materials to ESEA on time.

Postmark Deadline is May 19, 2017.

Selection of Recipients

ESEA Scholarship Committee has the sole responsibility for selecting recipients, basing the decision on criteria as set forth in this Program's Brochure and Application. Decisions of the Committee are final.

Certification

In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. If requested, I agree to supply proof of information I have given on this form. Falsification of information may result in termination of any scholarship granted. This application becomes the property of ESEA.

Applicant's Signature _____ Date _____

Employee's Signature (if different) _____ Date _____

ESEA Company Employer's Signature _____ Date _____