

SDAWWA Annual Scholarship – Criteria

1. The applicant, applicant's utility system, or applicant's parent (including step-parents and/or legal guardians) must have been a member of SDAWWA for 3 of the last 5 years including the year of application.
- 2.If the applicant is the SDAWWA member or if the applicant is an employee of an SDAWWA member utility water system, they must be pursuing a degree or technical certification or license to further their careers in the water industry and an employer must not be funding the costs of such education.
- 3.If the parent of the applicant is the member of SDAWWA, the applicant must be pursuing a degree or technical certification or license at a college, university, or vocational technical school. Course of study is not a determining factor. The school attended may be in state or out of state.
- 4.Applicant must complete the scholarship application and also provide documentation of acceptance/enrollment in a post-secondary education institution from registrar of the institution.
- 5.Applicants must have not received the SDAWWA scholarship previously.
- 6.Applications must be received by **May 1, 2024** to be considered for the award. The recipient(s) will be notified by the annual conference in September 2024.
- 7.If the parent is the member of SDAWWA, please attach a 100 to 500-word essay describing the parent's positive contribution to the water industry. If the applicant is the SDAWWA member, describe your positive contribution to the water industry. This essay, or a portion of it, may be read during the award ceremony.
- 8.The Scholarship Committee will determine the recipient(s) via a lottery system. The winner(s) will be announced at the Annual SDWWA Conference in September.

SDAWWA Annual Scholarship – Application

Please print legibly:

Date of Application: _____

Name/Address of Applicant: _____

Email Address: _____

Phone Number: _____

Name and Location (City and State) of
Post-secondary Education Institution: _____

Who is the Member of SDAWWA: _____

Membership in SDAWWA for 3 of the
Past 5 Years Including Year of Application: ____ Applicant ____ Parent/Guardian ____ Member Utility

Name of Member Utility if Applicable: _____

Parent Name/Address of Applicant: _____

Signature of Applicant: _____

Signature of Applicant's Parent/Guardian _____

The scholarship committee will verify all above information.

Please mail or e-mail this completed application, school enrollment documentation, and essay to the following address:

**SDAWWA Scholarship Committee
c/o SD AWWA
PO Box 353
Pierre SD 57501-0353
sdawwa@yahoo.com**