



COMPOSITE PANEL ASSOCIATION

*Advancing the wood-based panel and decorative surfacing industries
Celebrating 50 Years of Service (1960 - 2010)*

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Tel 703.724.1128 • 866.4COMPOSITES • Fax 703.724.1588

ROBERT E. DOUGHERTY EDUCATIONAL FOUNDATION 2010 SCHOLARSHIP APPLICATION FORM

Applicant _____
Permanent Address _____ Telephone _____
City, State/Province, Postal Code _____
Email _____

School Name _____
School Address _____ Telephone _____
City, State/Province, Postal Code _____

Birth Date _____ Citizenship (Country) _____

GRADE POINT AVERAGE – please provide an official transcript.

University Grade Point Average _____
Major Discipline Grade Point Average _____
Academic Classification 2010/2011 (Junior, Senior or Post Graduate) _____

Do you have any employment commitments after graduation? If so, please describe.

EDUCATION

| School | Years Attended | Graduate? Yes/No | Name of School | Field of Study | Degree |
|-----------------|----------------|------------------|----------------|----------------|--------|
| High School | | | | | |
| College/Univ. | | | | | |
| Graduate School | | | | | |
| Trade School | | | | | |
| Other | | | | | |

CANADA

Post Office Box 747, Station "B", Ottawa, Ontario K1P 5P8 • Tel 613.232.6782 • Fax 703.724.1588

INTERNATIONAL TESTING AND CERTIFICATION CENTER

73 Lawson Road, Suite 101, Leesburg, Virginia 20175 • Tel 703.724.1128 • Fax 703.724.1588

www.pbmdf.com

By signing below the applicant agrees to provide the Robert E. Dougherty Educational Foundation with a copy of his/her course registration for the 2010/11 academic year and notify the Foundation in writing of any changes, if selected to receive a scholarship award.

Signature of Applicant

Date

ACADEMIC ADVISOR APPRAISAL

Appraisal of the Applicant

Academic Advisor Name

University/College/Educational Institution Name

Mailing Address

Telephone

Email

Academic Advisor Signature

Date

(Scholarship award checks will be made payable to the student and mailed to their academic advisor.)

FOUNDATION MEMBER APPRAISAL

(Must be completed if other than an educational institution)

Appraisal of the Applicant

Nominating Person's Name

Company

Mailing Address

Telephone

Email

Nominating Person's Signature

Date