



The Virginia Transportation Construction Alliance

Scholarship Overview

The Virginia Transportation Construction Alliance (VTCA) provides financial assistance to help deserving young individuals pursuing education in college or technical education programs that may lead to the transportation construction industry. Scholarships are awarded annually. This scholarship is sponsored and supported by VTCA's members.

Eligibility

- Must be a citizen of the United States.
- Applicants can be current employees, or dependents, of current VTCA members or VDOT.
- Applicants must be completing their senior year of high school, possess a Grade Equivalent Degree (G.E.D.), or be currently enrolled in college, community college, university, or trade school in pursuit of a degree.
- Minimum cumulative grade point average of 2.0 on a 4.0 scale.
- A scholarship recipient is eligible to re-apply in successive years if the eligibility conditions continue to be met.

Application and Supporting Materials

- A completed and signed online application form.
- A copy of the applicant's transcript and grade report from the school currently attending or most recently attended. A minimum, cumulative academic performance of at least a 2.0 on a 4.0 scale is required for consideration.
- A copy of the acceptance letter from the college, university, technical school, etc. where the applicant plans to attend.
- Two letters from a teacher, school administrator, counselor, clergy, work, or military supervisor, who can address the qualifications and academic aptitude of the applicant, must be submitted in support of the candidate. Do not send letters of recommendation from immediate family members, close family friends, blood relatives, or relatives by marriage.
- A typewritten essay, between 500-1000 words, prepared by the applicant that describes your interests, and career goals with any emphasis on the transportation construction industries (if applicable). For previous scholarship recipients, please reflect on how the scholarship has affected you and your family and your future educational goals. The personal statement must be updated every application year.
- A recent high-resolution photo of the applicant. Electronic photos are preferred. Files must be 300 dpi or higher and in full-color JPEG, TIFF, or PDF format of less than 10MB. Hard-copy photographs are also acceptable but will not be returned.

Evaluation and Selection

Applications will be screened by the VTCA Scholarship Committee. The criteria for selection include, but are not limited to, academic performance, employment experience, and extracurricular and leadership activities. Selections will be announced mid-summer. In the event no qualified students apply, VTCA reserves the right to withhold the scholarship.

Applications and all supporting materials must be received by VTCA no later than May 9, 2025. For additional questions, contact Kayla Singleton at 804.330.3312 or by email at kayla@vtca.org. Mailed materials must be mailed to 9011 Arboretum Parkway, Suite 320, Richmond, VA 23236, and postmarked by May 9, 2025, to be accepted.



Scholarship Application

Applicant Details

Name: _____
Last First Middle

Home Address: _____
Number and Street City State Zip

Telephone: _____ School Phone: _____ Birthdate: _____

Email Address: _____

Are you related to someone, or are you an employee of VDOT or a VTCA Member Firm (Please circle one, and enter VDOT Division / Firm Name and the Name of the Employee):

Yes

- Employee (Self) at _____
Name of VDOT Division or Member Firm
- I am a spouse to _____ at _____
Name of Employee Name of VDOT Division or Member Firm
- I am a dependent to _____ at _____
Name of Employee Name of VDOT Division or Member Firm

No

Education:

High School Graduate or GED	Two Year Degree
Some College	Four Year Degree
Trade School Certificate: _____	

Accepted college applicant plans to attend:

<u>School & City</u>	<u>Title of Program</u>	<u>Expected Graduation Date</u>
_____	_____	_____

If you are presently in school or a training program, please provide the following:

<u>School & City</u>	<u>Title of Program</u>	<u>Expected Graduation Date</u>
_____	_____	_____
_____	_____	_____

List all secondary schools attended (Name & City):

Date of Graduation:

Briefly list your high school and/or college extracurricular activities:

Employment Information

Please provide a brief summation of your employment history, beginning with your most recent or present job. If the position was a part-time one, indicate how many hours you worked each week. If necessary, use additional sheets.

From _____ to _____
Month/Year Month/Year

Company name and type of business: _____

Address: _____

Supervisor's name and position: _____

Your duties: _____

From _____ to _____
Month/Year Month/Year

Company name and type of business: _____

Address: _____

Supervisor's name and position: _____

Your duties: _____

From _____ to _____
Month/Year Month/Year

Company name and type of business: _____

Address: _____

Supervisor's name and position: _____

Your duties: _____

Financial Need

If a dependent:

Father's or spouse's occupation: _____

Mother's or spouse's occupation: _____

Siblings in family: _____ Number dependent on parent: _____

What percentage of education and living expenses do you provide or expect to provide? _____

Are you receiving financial aid, grants, or other scholarships? _____ If yes, how much? _____

Anticipated annual college costs:

Tuition: _____ per year

Living expenses: _____ per year

Books: _____ per year

Other: _____ per year Describe: _____

Additional Comments related to financial need:

Additional comments: Please provide any additional information that will help the selection committee to properly evaluate your application.

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I certify that the information provided on this application is accurate to the best of my knowledge. I give my permission for the information contained herein to be used in the evaluation of my application and understand that the references received by VTCA in support of my application will be held in confidence. I understand that the VTCA Scholarship if awarded to me, will be paid directly to the accredited higher education institution of my choice.

Signature of applicant: _____ **Date:** _____

Signature of Parent or Guardian: _____ **Date:** _____

(If under the age of 18)