



## Roadway Worker Memorial Scholarship Program Application Form

Honoring those who have died or become  
permanently disabled while providing safer roads

### PURPOSE

The American Traffic Safety Services Foundation (ATSS Foundation) Roadway Worker Memorial Scholarship Program, awarded annually, provides financial assistance for post-high school education to the dependents of roadway workers killed or permanently disabled in work zone construction or maintenance activities within the work zone, including mobile operations and the installation of roadside safety features. Spouses of fallen workers and parents with custody or legal guardianship of surviving children are also eligible.

### APPLICANT ELIGIBILITY REQUIREMENTS

Eligible applicants must be dependents of roadway workers killed or permanently disabled in work zone construction or maintenance activities within the work zone, including mobile operations and the installation of roadside safety features. Spouses of fallen workers and parents with custody or legal guardianship of surviving children are also eligible. **The Manual on Uniform Traffic Control Devices (MUTCD) defines a work zone as an area of a highway with construction, maintenance or utility work activities.** A work zone is typically marked by signs, channelizing devices, barriers, pavement markings and/or work zone vehicles. It extends from the first warning sign or high-intensity rotating, flashing, oscillating or strobe lights on a vehicle to the END ROAD WORK sign or the last temporary traffic control device.

### AMOUNT OF SCHOLARSHIP

Each Roadway Worker Memorial Scholarship has a value up to \$10,000\*. If a particular applicant demonstrates a strong commitment to volunteerism, they may be eligible to receive an additional \$1,000 in honor of Chuck Bailey, an esteemed member of the roadway safety industry who passed away in June 2002.

\*Not to exceed the total qualifying costs of the institution.

### EDUCATIONAL INSTITUTION REQUIREMENTS

The scholarship must be applied to a post-secondary school or institution that requires a high school diploma or General Educational Development (G.E.D.) certificate or diploma for admission. This could include any public or private: four-year accredited college or university; two-year accredited college; or vocational-technical college or a training institution.

### SCHOLARSHIP SELECTION CRITERIA AND APPLICATION REQUIREMENTS

Applicants must provide a completed and signed Roadway Worker Memorial Scholarship Application Form and supporting materials to apply to the scholarship program. Applicants will be judged by the following four criteria:

- 1) Applicant's past academic performance record of high school grades.
  - a. An official copy of the applicant's transcript and grade report from the school currently being attended or most recently attended. The transcript should list all grade points earned and all academic coursework completed to date.
  - b. In the case of applicants already attending an institution of higher learning, their cumulative college grade point average (GPA) and academic performance will be considered.
- 2) Written essay that explains the applicant's reasons for wanting to continue his or her education.
  - a. Essay should be typed, no more than 200 words, and written by the applicant.
  - b. Include any current volunteer activities/accomplishments.
  - c. Include current extracurricular activities of the candidate.
- 3) Demonstrated need for financial assistance for continuing education with a completed and signed Free Application for Federal Student Aid (FAFSA) form.
  - a. FAFSA form can be obtained online at [studentaid.gov](http://studentaid.gov) or from your high school guidance office.
- 4) Two letters of recommendation in support of the candidate's application and the views expressed therein.
  - a. Letters may be from a teacher school administrator, counselor, member of the clergy or a supervisor who can address the applicant's qualifications and academic aptitude.
  - b. Letters will NOT be accepted from immediate family members, other relatives, relatives by marriage or close family friends.
  - c. Letters must have a signature, date and contact information of person submitting/writing the letter(s).
  - d. Previous/repeat scholarship applicant letters cannot be a duplicate of one previously submitted.

**Applicants must meet all the above requirements.**



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### APPLICATION DUE DATE

**Applications and all required documentation must be received no later than Feb. 15. Applications received after Feb. 15 may not be considered.** Applicants are encouraged to email their scholarship application and supporting materials. All applications and supporting materials will become property of the American Traffic Safety Services Foundation.

### SCHOLARSHIP APPROVAL AND NOTIFICATION

Final approvals are granted by the American Traffic Safety Services Foundation Board of Directors at its sole discretion. All applicants will be notified in writing of the results of consideration by the Scholarship Review Committee. If selected, applicants must provide a recent photograph for use in promotion of the scholarship program.

### SCHOLARSHIP YEAR AND AWARD DISBURSEMENT

The scholarship award year will be defined as the 12-month period specified in the award. Scholarship award money will be deposited by the American Traffic Safety Services Foundation with the university, college or institution of higher learning to which the student is admitted, accepted and which the student will attend.

The award money is credited to an account established in the individual's name at the school. The funds can be used by the recipient for: fees or charges required for tuition; fees or charges for room and board while attending school; and expenses for textbooks, course work, lab fees and other materials as required by a course instructor (e.g., safety glasses, art/drawing supplies, glass slides, etc.) for required course assignments or projects.

Scholarship awards are non-transferable to another individual or institution and are forfeited by the recipient upon his/her withdrawal from the institution where the scholarship award was dispersed by the American Traffic Safety Services Foundation, or upon failure to meet the institutions appropriate standards of academic achievement, conduct or character.

If the recipient is diagnosed post-award by a Board-certified medical physician as having a chronic or acute illness or traumatic injury that makes it impossible for the recipient to enter or continue his or her academic studies, the scholarship award money will be held for the recipients' academic use for up to 12 months. A letter from the physician to the American Traffic Safety Services Foundation must be received within 60 days of diagnosis.

In the event a scholarship recipient's educational endeavors are interrupted during the award year because he or she is called to active duty under Title 10 of the United States Code or National Guard duty in state status, the scholarship award money will be held for the recipient by the American Traffic Safety Services Foundation for up to 24 months, unless the time for active duty is extended by the military authority.

Any scholarship award recipient leaving the U.S. Armed Forces or The National Guard duty must reapply for reinstatement of the scholarship money or the remaining portion of the scholarship money within 90 days after severance from duty.

### FOR SCHOLARSHIP INQUIRIES, CONTACT:

Director of ATSS Foundation  
American Traffic Safety Services Foundation  
15 Riverside Parkway  
Fredericksburg, VA 22406-1077

**Phone:** 540-368-1701

**Email:** [foundation@atssa.com](mailto:foundation@atssa.com)



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## CONTACT INFORMATION AND ABOUT YOU

Print or type all information on application

Applicant Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Home Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Do you have any siblings grades 4-12? \_\_\_\_\_ Include age(s): \_\_\_\_\_

On a separate document: list any academic, leadership, athletic or employment awards or recognition you have received and/or community service you have provided.

How did you hear about our scholarship program?

- ATSS Foundation website (Foundation.ATSSA.com)
- Contacted directly by ATSS Foundation
- Social Media (Facebook, Twitter, LinkedIn, YouTube)
- Printed ad in a magazine/book
- Digital ad on a website
- College/institution scholarship website
- Other (please specify): \_\_\_\_\_
- Previous scholarship recipient
- Family member
- Worker from a road construction company
- Visited ATSS Foundation booth at a trade show
- Visited a National Work Zone Memorial event

## ACADEMIC HISTORY

Current Level of Education (which year high school or grad/undergrad): \_\_\_\_\_

Name of High School or College (whichever is most recent): \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Highest SAT or ACT Score: \_\_\_\_\_ Cumulative GPA: \_\_\_\_\_

Date of Graduation: \_\_\_\_\_

Check this box if you did not complete high school and provide the date, county and state in which you received your GED, along with a photocopy of your GED certificate/diploma.

## DECEASED OR DISABLED INDIVIDUAL'S INFORMATION

Please provide information about your parent, legal guardian or spouse whose death or permanent disability occurred in a work zone.

Name: \_\_\_\_\_ Relationship to Applicant: \_\_\_\_\_

Date of Accident: \_\_\_\_\_ Date of Death (if applicable): \_\_\_\_\_

If deceased, is his or her name honored on the National Work Zone Memorial? \_\_\_\_\_

If not, would you like to include his or her name on the National Work Zone Memorial? \_\_\_\_\_

*The National Work Zone Memorial is a traveling tribute which honors the names of those killed in work zones to help raise public awareness of the hazards in America's roadway work zones.*

Provide a brief description of the type of work being done in the work zone and the cause of the accident (highly recommended to include a newspaper or media article if available):

If your parent, guardian or spouse is disabled, please explain the nature of the disability. A third-party incident report and doctor's report of disability must be submitted with the application. (Note: ATSS Foundation reserves the right to request further information from other sources regarding the nature of the disability.)



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## EMPLOYER OR FORMER EMPLOYER INFORMATION OF THE DECEASED OR DISABLED

Please provide information about your deceased or permanently disabled parent, legal guardian or spouse's employer or former employer. The ATSS Foundation will contact employer to verify incident.

Employer/Former Employer Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_

**FOUNDATION USE**  
*(Incident verification notes):*

## OTHER PARENT OR LEGAL GUARDIAN INFORMATION (IF APPLICABLE)

Name: \_\_\_\_\_ Relationship to Applicant: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Cell Number: \_\_\_\_\_  
Email Address: \_\_\_\_\_

## INTENDED COLLEGE OR INSTITUTION INFORMATION (IF KNOWN)

Name of Institution to which you will apply scholarship funds: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Website: \_\_\_\_\_  
Have you been accepted for admission to this school? \_\_\_\_\_ Which semester/year? \_\_\_\_\_  
What area of academic concentration will you pursue? \_\_\_\_\_  
If you are already in college, what is your cumulative GPA? \_\_\_\_\_  
Anticipated graduation date (month, year): \_\_\_\_\_  
Estimated yearly tuition, room and board, and textbook expenses: \$ \_\_\_\_\_

**I certify with my signature below that all information provided in this application is accurate to the best of my knowledge. I understand that providing false or misleading information will result in forfeiture of any scholarship that may be awarded.**

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Checklist - Application and supporting materials must be received by Feb. 15 and include:

- Completed Application Form
- Official School Transcripts (or GED certificate/diploma, if applicable)
- Newspaper or media article describing the work zone incident and cause (if available, highly recommended)
- Applicant's Essay including any Current Volunteer or Current Extracurricular Activities
- Completed and signed FAFSA Form
- Two Letters of Recommendation
- Disability Reports of Parent, Guardian or Spouse (if applicable)

**Email scholarship application package by Feb. 15 to: [foundation@atssa.com](mailto:foundation@atssa.com)**

**Or mail to:** American Traffic Safety Services Foundation  
Attn: Director of ATSS Foundation  
15 Riverside Parkway, Fredericksburg, VA 22406-1077