



## VEDC Scholarship Application

In partnership with the College of the Sequoias (COS) Training Resource Center, the Visalia Economic Development Corporation (VEDC) is offering companies, organizations, and individuals the opportunity to take training or classes with the COS Training Resource Center via a full or partial scholarship for their employees or themselves. (Limited to three employees per company application). Membership in VEDC is not required but it is strongly encouraged to secure the maximum scholarship award. Training in compliance or regulatory topics will not be considered. Interested applicants are encouraged to apply and fill out the VEDC Scholarship Application below.

### Instructions:

1. Please print clearly the following information. Turn in your completed application, with all applicable signatures and other required materials to Bruce Nicotero for review.
  - a. If this form is incomplete, inaccurate, or not signed, it will not be considered.
  - b. In addition, if there are missing required materials, your application will not be considered.
  - c. For unemployed applicants, please write "N/A" on questions/sections that are not applicable to you.
2. For questions/concerns regarding the application, please contact VEDC Executive Director, Bruce Nicotero: (559) 901-4207 or [ban1951@comcast.net](mailto:ban1951@comcast.net).
3. For questions/concerns regarding classes/trainings, please contact the College of the Sequoias (COS) Training Resource Center: (559) 688-3130 or [trainingcenter@cos.edu](mailto:trainingcenter@cos.edu).

### Required Materials for VEDC Scholarship Application:

- Scholarship Application Form**
- Open Enrollment Registration Form**
- Essay Questions**
- References Sheet**
- Letters of Recommendation (Optional)**



## 1) Personal Information

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

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

Address Line 2: \_\_\_\_\_

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

Cell Phone #: \_\_\_\_\_

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

Level of Education:

- High School
- Some College
- Associate's Degree
- Bachelor's Degree
- Master's Degree or Higher

Date of Birth: \_\_\_\_\_

## 2) Company/Organization Information

Company Name: \_\_\_\_\_

Current Job Position/Title: \_\_\_\_\_

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

Address Line 2: \_\_\_\_\_

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

Office Phone #: \_\_\_\_\_

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

Industry (please check all that apply):

- Manufacturing
- Agriculture
- Construction
- Finance



- Healthcare**
- Education**
- Non-Profit**
- Public Service/Government**
- Other:** \_\_\_\_\_

**Are you currently employed?**

- Yes, I am employed.**
- No, I am unemployed.**

**What is your current standing with your employer?**

- Part-time**
- Full-time**
- Unemployed**
- Other:** \_\_\_\_\_

**How many years have you worked for your current employer?** \_\_\_\_\_

**Does your employer currently have an effective training program?**

- Yes**
- No**
- Unsure**

**Are you applying at the request of your current employer?**

- Yes. If yes, please enter the name of your employer contact/representative and contact information here:**
  - Full Name:** \_\_\_\_\_
  - Email Address:** \_\_\_\_\_
  - Phone Number:** \_\_\_\_\_
- No**

**Please list your skills (i.e. mechanical, technical, office skills, etc.):**

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**Please list any work-related certifications that you have:**

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**Does your employer encourage you to get outside training assistance/education?**

- Yes
- No
- Unsure
- Other: \_\_\_\_\_

**Please list any non-employer training related to your job:**

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**Will you use the training provided by the COS Training Resource Center to:**

- Increase your job position and/or wage at your current employer?**
  - Yes
  - No
  - Unsure
  - Other: \_\_\_\_\_
- Increase your ability to find a different higher paying job elsewhere?**
  - Yes
  - No
  - Unsure
  - Other: \_\_\_\_\_
- Help you to stay employed?**
  - Yes
  - No
  - Unsure
  - Other: \_\_\_\_\_
- Is there a particular company or industry that you are hoping to work for?**
  - Yes (name company or industry): \_\_\_\_\_
  - No
- Is there a particular position that you are seeking?**
  - Yes. If so, list the position(s): \_\_\_\_\_
  - No



### **3) Trainings/Classes Selection:**

**Please list the trainings/classes you are interested in taking:**

## Total Training Cost: \$



#### **4) Signature Agreement**

By signing this application form, I understand and agree to the following statements:

- (1) If granted this scholarship by the VEDC, it will be used to pay for the College of the Sequoias Training Resource Center's eligible classes/trainings for myself or my employees to attend.**
- (2) I understand that these classes/trainings are not-for-credit and will never be found on any official college transcripts or be used towards a collegiate degree.**
- (3) I understand that it is my responsibility to ensure that my employees or I will attend the trainings/classes if funding is approved by the VEDC. Excessive absences/no-shows for any classes/trainings may affect my ability to utilize the subsidies provided by the VEDC in the future.**
- (4) I have provided correct and accurate information on this application form, and have submitted the requested materials for review.**
- (5) I understand that I am sharing this information and may be contacted by the COS Training Resource Center or the VEDC about my application.**

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

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#### **Visalia Economic Development Corporation Use Only:**

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

Application Status:

- Approved
- Denied
- Other: \_\_\_\_\_

If approved, amount awarded: \$ \_\_\_\_\_

#### **COS Training Resource Center Use Only:**

Signature of Final Approval: \_\_\_\_\_ Date: \_\_\_\_\_



## References Sheet

**Instructions:** Please list 3 references from either your past or current workplaces.

### 1. First Reference

- a. First Name, Last Name: \_\_\_\_\_
- b. Department/Company: \_\_\_\_\_
- c. Job Position/Title: \_\_\_\_\_
- d. Address: \_\_\_\_\_
- e. Telephone Number: \_\_\_\_\_
- f. Email Address: \_\_\_\_\_
- g. Relationship to Applicant: \_\_\_\_\_

### 2. Second Reference

- a. First Name, Last Name: \_\_\_\_\_
- b. Department/Company: \_\_\_\_\_
- c. Job Position/Title: \_\_\_\_\_
- d. Address: \_\_\_\_\_
- e. Telephone Number: \_\_\_\_\_
- f. Email Address: \_\_\_\_\_
- g. Relationship to Applicant: \_\_\_\_\_

### 3. Third Reference

- a. First Name, Last Name: \_\_\_\_\_
- b. Department/Company: \_\_\_\_\_
- c. Job Position/Title: \_\_\_\_\_
- d. Address: \_\_\_\_\_
- e. Telephone Number: \_\_\_\_\_
- f. Email Address: \_\_\_\_\_



g. Relationship to Applicant: \_\_\_\_\_

### **Essay Questions**

**Instructions:** Please read and answer each essay question on a separate document. When answering these essay questions, please type your answers and use Times New Roman, 12-size font, and double-spaced lines. Each essay question's response has a word limit of 300 words.

1. Tell us about a completed work project that you are most proud of.
2. Tell us about your career goals for the future.
3. In your own words, why should the VEDC invest in your training and/or skills enhancement?