



# Society of Explosives Engineers Education Foundation Scholarship Application/Renewal Academic Year 2025-2026

**Page 2:** Students who have previously received SEE Education Foundation support must complete a scholarship application each year and include updated documents – resume, transcripts, letters of recommendation, as well as a need, goals, and challenge statement.

- a) Applicant's Information: Please complete this section with your school information or home address. Include your hometown, as some scholarships have geographic requirements or preferences.
- b) College Program: Scholarship recipients **must** be full-time students. Include the name and address of your university, academic year, and educational objective. Also indicate any previous colleges you've attended, degrees attained and dates attended.

**Page 3:** Please list all information for your current university's financial aid office, including contact name.

List any current earnings, including any additional scholarship funding, other sources of income such as parental support, summer employment or school year jobs.

List all school-related expenses and include tuition, books, fees, and education expenses.

Please indicate your current employment status and include a copy of your most recent résumé.

**Challenges, Goals, and Financial Need:** The Challenges, Goals and Financial Need Statements are required components of the Scholarship Application. These should be presented by you in writing, with one portion addressing your goals, one addressing the challenges you have faced, and another identifying financial need that any scholarship funds would fulfill. These personal narratives will be provided to the review committee to aid in evaluating the application. These components should demonstrate who you are as an applicant, what your career aspirations are, the challenges you have faced, and what you will do with the scholarship funds. The purpose of the statements is to provide the review committee a more well-rounded description of who you are as an applicant, where you hope your career will take you, and why you are applying for scholarship funding.

**Page 4:** Your application must include two signed letters of recommendation from people who are not family members. They should be from those who can speak to who you are as a person and as a student. These references should have knowledge of your academic ability, career aspirations, or of the challenges you have faced. One letter **should** be from an academic reference and one **should** be from a professional or career-related reference. Letters received by the SEE Education Foundation should correspond with the names listed on the application.

Please indicate whether you permit the ISEE and the SEE Education Foundation to contact your college or university to verify enrollment status, financial need or to use your photograph and/or name in promotional materials.

Your completed scholarship application must be EMAILED to [scholarship@isee.org](mailto:scholarship@isee.org). Please use the checklist provided to ensure your application is complete and received **no later than May 6, 2025**. **Late and incomplete applications will not be considered for an award.**

**Page 5: Scholarship Agreement Form:** SEE Education Foundation Scholarship funds are sent directly to the college or university you are attending and are to be used for tuition and related expenses. By completing this section you are agreeing to abide by the guidelines set forth by the SEE Education Foundation and should you not complete the program of education in which you were enrolled the total scholarship monies are to be returned to the Education Foundation.

Please complete the Student Information section with your school address and contact information and complete the Department Information section with the contact name and information for the Department Head or main Department contact for your education program or the person to whom scholarship funds are to be sent. The Agreement Form **must** be received in order to obtain SEE Education Foundation Scholarship Funding.

# Society of Explosives Engineers Education Foundation Scholarship Program Application Packet – 2025-2026 Academic Year

All applications will be reviewed by the SEE Education Foundation Scholarship Review Committee. Awards are based on career résumé and personal goal statement; academic potential; written communications; statement of financial need; and ability to overcome personal challenges.

**Please Note: Late or incomplete applications will not be considered by the Scholarship Committee.**

**Students re-applying for SEE Education Foundation Scholarships must complete the application form each year and include an updated work and experience résumé; financial information; current academic transcripts and letters of recommendation. **Deadline to submit your completed materials: May 6, 2025.****

**SCHOLARSHIP APPLICATION** ☐

(never received scholarship from us)

**SCHOLARSHIP APPLICATION RENEWAL** ☐

(have received a scholarship from us in past)

**Check the Appropriate Box (Please type/print legibly)**

## 1. Applicant's Information

Name \_\_\_\_\_ Email \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Country \_\_\_\_\_ Citizenship \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Student ID Number \_\_\_\_\_ Birth Date \_\_\_\_\_

Marital Status \_\_\_\_\_ Home State/Country \_\_\_\_\_

(Note: Some scholarships are geographically based.)

Dependent(s) Relationship/Age \_\_\_\_\_

(Note: Dependents are those who rely on you for support for more than half the year.)

## 2. College Program

Education institution attending for the 2025-2026 academic year: \_\_\_\_\_

Institution Address: \_\_\_\_\_

Your Field of Study: \_\_\_\_\_

Your academic year to be covered by scholarship in 2024-2025 (Check One):

Freshman ☐ Sophomore ☐ Junior ☐ Senior ☐ Graduate ☐ Other ☐

Other (explain): \_\_\_\_\_

Educational degree being pursued (Check One):

Associate ☐ Bachelor ☐ Master ☐ Doctoral ☐ Other ☐

Other (Explain): \_\_\_\_\_

Graduation Date: \_\_\_\_\_ Cumulative GPA: \_\_\_\_\_

Student Status (Check One): Continuing Student ☐ New Student ☐

Give dates, major field of study and degree(s) earned: \_\_\_\_\_

Universities attended: \_\_\_\_\_

# Society of Explosives Engineers Education Foundation Scholarship Program Application Packet – 2025-2026 Academic Year

**University Financial Aid Office (the office that deposits your scholarship into your account – we do not send scholarship checks to the student or faculty advisor)**

University Name: \_\_\_\_\_

Financial Aid Office Building Name: \_\_\_\_\_ Tel: \_\_\_\_\_

Financial Aid Building Name: \_\_\_\_\_ Financial Aid Room Number: \_\_\_\_\_

Street Address (No PO Boxes): \_\_\_\_\_

City: \_\_\_\_\_ Country: \_\_\_\_\_ Postal Code: \_\_\_\_\_

## Your Financial Information

**Income** – Last Calendar Year (Actual/Estimated)

### Earnings / Income

Self: \_\_\_\_\_ Spouse: \_\_\_\_\_

Financial Aid\* \_\_\_\_\_

*\*(Include financial aid received or anticipated from all sources including federal / government student aid, financial aid from your school, state or provincial grants, other scholarships, tuition reimbursement, and veteran's educational benefits).*

Other Income (explain): \_\_\_\_\_

Total Income: \_\_\_\_\_

### Expenses

Expenses at the school you intend to enter:

Tuition/fees: \_\_\_\_\_ Room/Board: \_\_\_\_\_

Books: \_\_\_\_\_ Transportation: \_\_\_\_\_

Other (specify): \_\_\_\_\_ Total Expenses: \_\_\_\_\_

## 3. Work Résumé

Do you intend to continue working while you are attending college (Check One)? Yes ☐ No ☐

Current employment status (Check One):

Employed Part-time ☐

Unemployed ☐

Employed Fulltime ☐

Public Assistance ☐

Provide a résumé and personal development experiences information that can be shared with prospective industry employers. (Please include employers for the last four years with most recent first.)

## 4. Challenges, Goals and Financial Need

The Scholarship Review Committee would like to learn more about you. Your application **must** include a **challenge narrative** which describes any challenges you are facing, or have faced, in your life or the pursuit of your education or career, a **goal statement** which describes yourself and your career aspirations and a **statement of financial need** that identifies why you are pursuing this scholarship and how you will use any scholarship funds and why you are applying for this scholarship.

## Society of Explosives Engineers Education Foundation Scholarship Program Application Packet – 2025-2026 Academic Year

---

Your application **MUST INCLUDE** two signed letters of recommendation from people other than family members or personal friends who have first-hand knowledge of your challenges and aspirations. One must come from an academic reference; the other must be a professional or career-related reference. Please list these persons below:

Name	Relationship	Phone Number
1. _____	_____	_____
2. _____	_____	_____

---

I certify that all statements in this application are true and correct. I give the college or school I attend my permission to provide the Society of Explosives Engineers Education Foundation with information about my financial aid.

I give the International Society of Explosives Engineers permission to use my name and photograph to promote the Foundation and the education and scholarship program. Yes ☐ No ☐

Your signature: \_\_\_\_\_ Date: \_\_\_\_\_

---

### 5. Email your application to:

[scholarship@isee.org](mailto:scholarship@isee.org)

Subject Line: {YOUR LAST NAME} SEE Education Foundation Scholarship Application

Items to include in the Completed Application Packet:

1. ☐ Completed Scholarship Application
  2. ☐ \*College/High School Transcript(s) (Department Approved with GPA)
  3. ☐ Work Résumé
  4. ☐ Personal Challenge, Financial Need and Goal Statement
  5. ☐ **Two** Letters of Recommendation (may be emailed separately from recommender)
  6. ☐ College Acceptance Letter or Course Schedule (incoming freshmen only)
  7. ☐ Agreement Form (attached)
- 

Your **COMPLETED** application must reach the Foundation offices **NO LATER THAN MAY 6, 2025.**

**Late or incomplete applications will not be considered by the Scholarship Committee.** Please include only the materials requested. Additional information or materials will not be considered by the Committee. Email completed application and requested materials to [scholarship@isee.org](mailto:scholarship@isee.org).

**\* IMPORTANT: Current department-approved academic transcripts should be included with this application; documents sent separately must include the name of the applicant. Unofficial electronic transcripts are accepted.**

**Society of Explosives Engineers Education Foundation  
Scholarship Program Application Packet – 2025-2026 Academic Year**

---

**Scholarship Agreement Form**

I understand that if selected for a scholarship, the award is sent directly to the financial aid office of the school indicated on page 3 and not to me or my academic advisor. The scholarship is to be used exclusively for tuition and related expenses in the current academic year.

Monies not applied to tuition or associated fees and expenses in the current academic year are to be returned to the SEE Education Foundation Scholarships. Further, monies are to be returned to the SEE Education Foundation should I not complete the program of education in which I was enrolled at the time of application for an SEE Education Foundation Scholarship.

**Student Applicant Information** (Please Print/Type)

Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State/Province: \_\_\_\_\_  
Country: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Email: \_\_\_\_\_  
Tel: \_\_\_\_\_  
Date: \_\_\_\_\_ Signature: \_\_\_\_\_

---

**Notification of Your Department Head/Professor of Scholarship Award** (Please Print/Type)

If you receive a scholarship and would like your department chair/professor to be notified, you **MUST** complete the information below. If this is not completed, we will not be able to contact anyone other than the Financial Aid Office representative regarding an awarded scholarship.

Contact Name: \_\_\_\_\_  
University: \_\_\_\_\_  
Department: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State/Province: \_\_\_\_\_  
Country: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Email: \_\_\_\_\_  
Telephone: \_\_\_\_\_

***NOTE: A signed form must be returned to the SEE Foundation Office before Scholarship funds will be released. Incomplete applications will not be considered for an award.***

2/2025

