## Todd Kinnikin Memorial METALfab Scholarship

# Presented by the Upper Midwest Chapter of NOMMA Administered by the NOMMA Education Foundation (NEF)

METALfab2019 - March, 2019 Indiana Convention Center, Indianapolis, IN

Please make sure that your application and written submission is complete and legible. The selection committee will not review incomplete applications. PLEASE do not send duplicate application.

Applicant's Name:			
Company:			
Address::			
City:	State:	Zip Code:	Country:
Phone:	Applicar	nt's Email Address:	
Number of Years with Current E	mployer:		
Number of Years Working in the	Industry:		
Type of Work Applicant Perforn	ns:		
Scholarship Agreemer	nt		
	value of the experience wit	thin 60 days of completion of the eve	derstand and agree to provide the committee ent. I agree to present the Upper Midwest
I verify that the information giv	en on this application fo	rm is true and correct.	
Applicant Signature:		Date:	
Please confirm if you are an	owner/partner in yo	our business, or of you are an	employee*.
		ate supervisor or business owner the year the scholarship is award	indicate their approval of your submissior ed.
*Please indicate that you will be	able to pay for the cost	of attending METALfab and will s	upply dated receipts for reimbursement.
Signature of Supervisor/Owner		Da	te:
Print Name:	ne:Title:		

Email: OMalleywelding@sbcglobal.net

### **Submit Application by January 6, 2019 To:**

Todd Kinnikin Memorial Scholarship/UMWC c/o Mark O'Malley 1209 Badger Street

Yorkville, IL 60560 Fax: 630.553.1605

#### **Todd Kinnikin Memorial METALfab Scholarship**

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#### Provide a summary of what you would gain by attending METALfab if you were awarded the Scholarship

The selection committee will view this page when making their decision .Please do not identify yourself, your company or location in anyway. You maybe be disqualified should you do so. You may use additional pages if necessary .