

SBE Chapter 16
Arne Skoog Memorial
Scholarship Fund

PO Box 9644 • Seattle, WA 98109
Phone: (425) 222-9699 • Fax: (425) 222-9699 • Website: sbe16.org

Application for scholarships from the
SBE Chapter 16
Arne Skoog Memorial Scholarship Fund
for Broadcast Engineering Education and Certification

Final Date of Acceptance for Applications (received by) – June 30st

Name: _____

Email: _____

Permanent Address: _____

City: _____ State: _____ Zip: _____

Daytime Telephone: _____

Are you a current Member of an Alaska, Montana, Oregon, Idaho or Washington SBE Chapter?
 Yes No Chapter #: _____ Membership #: _____

The SBE Chapter 16 Arne Skoog Memorial Scholarship Fund

Scholarship History

Arne Skoog was an active Member of the Society of Broadcast Engineers (SBE) Chapter 16, serving as the Chapter's < 1 GHz Frequency Coordinator. He was very well-known in many areas of the NW, and he was a kind friend to every Broadcasting Engineer he met. In his memory, SBE Chapter 16 established the **SBE Chapter 16 Arne Skoog Memorial Scholarship Fund** to award scholarships to SBE Members in the Northwest area of the United States interested in furthering their knowledge of broadcast engineering, through accredited education programs or certification exams.

Complete the application

Answer all questions completely and honestly. All information collected will be kept private.

Criteria & Eligibility

To be eligible for the **Arne Skoog Memorial Scholarship Fund**, candidates must have a career interest in the **technical** aspects of broadcasting. These scholarships are typically presented to applicants who have some work experience in broadcast engineering and who are interested in continuing their education in order to advance their careers. Preference is given to those SBE Members who exhibit a sincere interest in broadcasting as shown through past achievements (such as but not limited to: previously earned certifications & other education efforts), and with an increased consideration given to those who have demonstrated their participation in Chapter

activities (i.e. – attending lunch meetings, social functions, service on the Chapter Board or on a board committee, & newsletter/website submissions).

In early July, the Scholarship Committee will recommend their suggested recipients of the awards to the Chapter 16 Board. The Chapter 16 Board will permit distribution of the funds to the approved recipients. These funds will vary from \$150 to \$1000. Recipients are limited to one scholarship award per year. Funds can only be used for tuition, books, related instructional and testing preparation materials, and fees associated with examinations.

All entries should be sent to the SBE Chapter 16 Scholarship Committee, PO Box 9644, Seattle, WA 98109. Your application may also be received by any Chapter 16 Board Officer.

Employer (if applicable): _____

Address: _____

City: _____ State: _____ Zip: _____

Title: _____ Length of Employment: _____

Duties: _____

Are you currently enrolled in post secondary classes or programs related to broadcast technology or engineering?

Yes (complete the following): No

Name of school or program: _____

Date of entrance: _____ Declared Major: (if any) _____

Class: Freshman Sophomore Junior Senior

Total Credit Hours through last semester: _____ Expected date of graduation: _____

Current Grade Point Average (indicate scale): _____

Extracurricular Activities: _____

Have you ever attended any other trade school, college or university?

Yes (complete the following): No

Name of institution: _____

Length of time enrolled: _____ Grade Point Average: _____

Did you earn a degree? Yes No If yes, what was it in? _____

Extracurricular activities: _____

Have you applied for, or received, any other scholarships? Yes (complete the following) No

<u>Name of Scholarship:</u>	<u>Received?</u>
_____	_____
_____	_____

Are you currently involved in the communications industry other than already explained above?

Yes (please explain): No

Please provide the names of two members of the Society of Broadcast Engineers (optional but helpful) as references. If you do not know any SBE members, submit your application with other educational or professional references.

Name: _____ Name: _____

Employer: _____ Employer: _____

Address: _____ Address: _____

City/State/Zip: _____ City/State/Zip: _____

Daytime Phone: _____ Daytime Phone: _____

Have you received any previous certifications? Yes (please list) No

Have you participated within any SBE Chapter by volunteering for Board or committee service?

Yes (give position and dates): No

