NATIONAL FASTENER DISTRIBUTORS ASSOCIATION

FASTENER TRAINING WEEK SCHOLARSHIP APPLICATION

(Revised June 25, 2026)

- To apply for a scholarship, all pages of this form must be completed.
- If any of the sections are blank, it will count against the applicant.
- The scholarship application deadline is **June 1**.
- Applications can be emailed to *amy@nfda-fastener.org*
- Scholarship can be used for any Fastener Training Week in 2027 or 2028.

I. APPLICANT PERSONAL INFORMATION

Name _____

Address _____

City _____ State _____ Zip _____

Telephone (_____)_____ Email _____

II. APPLICANT STATEMENT AND AUTHORIZATION (To be completed by applicant)

I hereby acknowledge that the information contained in this application is true and correct. I understand and agree that any scholarship award is applicable only if I am currently employed by an NFDA member company and is not transferable. I understand that any scholarship award will be made payable to the Fastener Training Institute. I understand I will be evaluated on the basis of the information provided in this application form. After I complete the Fastener Training Week program I will submit a report on what I learned and how I will apply this knowledge to my job and my career. I acknowledge this award, if granted, is for tuition only and that it does not include travel or other expenses associated with attending Fastener Training Week.

Date _____ Applicant's Signature _____

III. SPONSOR AUTHORIZATION (To be completed by manager or owner of the sponsoring NFDA member company.)

I hereby verify that this scholarship application is submitted by an employee who works in our company.

Date _____ Signature _____

Name _____ Title _____

NFDA Member Company _____

Telephone (_____)_____ Fax (_____)_____

Email _____

Please describe why you want this employee to complete this training and the value it will provide to your company

_____

_____

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_____

IV. PERSONAL ACHIEVEMENTS

List any honors, awards, offices, and achievements in which you have been involved (such as work, community, religious, and volunteer activities). List the institution and the year.

_____

_____

_____

V. WORK EXPERIENCE

Are you currently a ❒full time or ❒ part time employee? (check one)

How long have you been with your current employer? _____

What is your current job position? _____

How long have you been in your current position? _____

What other experience do you have in the fastener industry? _____

VI. ESSAY

Please describe in the space below why you would like to attend Fastener Training Week, the value it will bring to you in your current position and your future career plans, and the value it will bring to your company. Optional: professional and personal letters of reference.

National Fastener Distributors Association
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Seal Beach CA 90740