



HEAVY CONSTRUCTION CONTRACTORS ASSOCIATION  
**SIDNEY R. JOHNSTON MEMORIAL  
SCHOLARSHIP TRUST**  
APPLICATION FOR SCHOLARSHIP

## JUDGING CRITERIA

Grades in High School  
National College Board Score  
(SAT & ACT) \*Optional\*  
Extra-Curricular Activities  
Community Engagement  
Motivation to Succeed  
Financial Need

## ELIGIBILITY

Applicant must be enrolling in a full-time, four-year academic institution as of September 2024.

Applicant must be between the ages of 17 and 20.

Applicant must be currently enrolled as a high school senior or be a high school graduate enrolling as a freshman in an academic institution.

Applicant's immediate family member or guardian must be employed with a firm that is a member of the Heavy Construction Contractors Association.

**QUESTIONS?  
CONTACT  
DEBORA HARVEY,  
TRUST ADMINISTRATOR**

**(703) 392-7410  
DHARVEY@HCCA.NET**

## GRANT INFORMATION

Established in 1980 and named for the late President of HCCA, the Sidney R. Johnston Memorial Trust rewards two or more scholarships each year to children of HCCA member firm employees who seek to further their education. Each Scholarship is worth \$10,000.00 and will be paid on the basis of \$2,500.00 for each academic year of a four-year college program (provided the recipient remains academically eligible throughout his/her time in college). The Trust has awarded over \$416,550 in scholarships to date.

## INSTRUCTIONS

- 1.All sections of this application must be completed. Please verify that all necessary signatures (applicant, parent or guardian and high school counselor) are included.
- 2.Official copy of high school transcript must be included.
- 3.SAT/ACT scores are recommended but optional.
- 4.Letters of recommendation may be included.
- 5.Applicants may be asked to appear before the scholarship trustees for an interview.
- 6.The application and all supporting documents must be received by the HCCA no later than Friday, March 29, 2024. Applications received after that date will not be considered.
7. Submit application by E-mail to [julie@hcca.net](mailto:julie@hcca.net) or mail to 9251 Industrial Court, Suite 201 Manassas VA. 20109.
- 8.Scholarship winners will be notified in writing by HCCA no later than May 6, 2024.
- 9.Winners will be required to provide Social Security Number among additional information to process scholarship.

All information and attachments provided herein are considered CONFIDENTIAL. Information is not for dissemination for any purpose other than for review by the HCCA Sidney R. Johnston Scholarship Board of Trustees. The SRJ Scholarship Board of Trustees is a IRS 501c(3), charitable organization affiliated with the HCCA.



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**Directions:** Submit completed Application and Supporting Documents by March 29, 2024.  
E-mail julie@hcca.net or mail HCCA 9251 Industrial Court Ste. 201, Manassas, VA 20109.

**GENERAL INFORMATION**

Date of Submission: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

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

High School Graduation Date: \_\_\_\_\_

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

City, State & Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Name of Parent/Guardian: \_\_\_\_\_

Parent/Guardian's Employer: \_\_\_\_\_

Name of HCCA Associated Person(if different than above): \_\_\_\_\_

Relationship: \_\_\_\_\_

Name of HCCA Associated Firm: \_\_\_\_\_

**Applicant Signature:** \_\_\_\_\_

**Parent/Guardian Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_



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You may attach additional sheets of paper for essay questions, if necessary.

1. List all secondary schools attended:

2. List all schools applied for:

3. Describe high school extra-curricular activities (short essay).  
May include letters of recommendation.

4. Describe all service/community/job activities (short essay).  
May include letters of recommendation.

5. Why did you participate in #3 and #4? (short essay)

6. Why are you seeking a college education? (short essay)

7. How will this Scholarship help you in your education? (short essay)

**TO BE COMPLETED BY YOUR HIGH SCHOOL COUNSELOR**

I have reviewed the applicant's presentation, and to the best of my knowledge, the data provided reflects and described the activities of the applicant.

Counselor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Counselor's Name Printed: \_\_\_\_\_