



# Scholarship

For Independent Contractors, Employees and/or Their Dependent Children of Eligible Transportation and Logistics-Related Companies.

## 2024 Open Road Foundation Scholarship Application

A scholarship from the Open Road Foundation will be awarded in consideration of an applicant's academic achievements, community involvement and financial need. It is awarded for one year in an amount determined by the Foundation. It is valid for the academic year it is awarded and cannot be held over without the approval of the Foundation Board of Trustees. Applicant must be an independent contractor or employee (or a dependent) at an eligible transportation or logistics-related company. Deadline for submission is July 19, 2024.

### 1. Personal Data

Name \_\_\_\_\_ Social Security No. \_\_\_\_\_

Mailing address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone number (\_\_\_\_) \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Single \_\_\_\_\_ Married \_\_\_\_\_ No. of Dependents \_\_\_\_\_

How are you affiliated with an eligible company: \_\_\_\_\_ Employee \_\_\_\_\_ Contractor \_\_\_\_\_ Dependent  
Company: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Title: \_\_\_\_\_

Supervisor's Phone: (\_\_\_\_) \_\_\_\_\_ x \_\_\_\_\_

**2. School History**

High School \_\_\_\_\_ City: \_\_\_\_\_

Year of High School Graduation \_\_\_\_\_

Name of College or University attended \_\_\_\_\_

Years of College Completed \_\_\_\_\_

Major: \_\_\_\_\_

Minor: \_\_\_\_\_

(if applicable)

Activities, Awards and Honors (List on a separate sheet if needed.)

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Should you be awarded a scholarship, please provide all college/university student financial aid contact information where the funds should be sent.

Univ.: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Check if applicable:  trade school  online only  other

**3. Additional Information**

Hobbies and recreational interests: \_\_\_\_\_

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Have you ever been convicted of a felony? \_\_\_\_\_ If yes, attach a full explanation of conviction..

If you are a dependent of an eligible employee or contractor, list your:

Father's Name \_\_\_\_\_ Occupation: \_\_\_\_\_

Father's Address \_\_\_\_\_

Mother's Name \_\_\_\_\_ Occupation: \_\_\_\_\_

Mother's Address \_\_\_\_\_

List the type and amount of any other financial aid you are or expect to receive: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**MAIL TO**

***Open Road Foundation • P.O. Box 92777 • Southlake, Texas 76092***  
*For questions please call (214) 205-7495*

**Deadline for Application is July 19, 2024**

[www.openroadfoundation.com](http://www.openroadfoundation.com)

