



"Road to Your Future" Scholarship Application

Allegany County Town Highway Superintendents Association (ACTHSA)

Award Amount: Two (2) scholarships of \$1,500 each

Academic / Training Year: _____

Applicant Information

Full Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

Email Address: _____

Date of Birth: _____

High School Currently Attending / Most Recently Attended:

High School Graduation Date (or expected): _____

Post-Secondary Education or Training Information

(Check one and complete the applicable section)

- Alfred State College
- Alfred University
- BOCES CDL Program

If attending Alfred State College or Alfred University:

Program of Study (major):

Degree Level:

- Associate Bachelor

If attending BOCES:

Program:

- Class A- Tractor Trailer Commercial Driver's License (CDL-A)
- Class B- Commercial Driver's License (CDL-B)

BOCES Location: _____

Program Start Date: _____

Expected Completion Date: _____

References:

(At least one reference required - teacher, guidance counselor, employer, or program instructor)

Reference Name: _____

Title/Relationship: _____

Phone or Email: _____

Certification & Signature

I certify that the information provided in this application is true and complete to the best of my knowledge. I understand that providing false information may result in disqualification from scholarship consideration.

Applicant Signature: _____

Date: _____

Submission Instructions

Completion of applications must be submitted by: March 15, 2026

Please return applications to:

ACTHSA - Road To Your Future Scholarship
Mail: PO Box 13, Belmont, NY 14813
Email: acthsasecretary@outlook.com