



Raymond A. Jack Operator Scholarship Application Form

CONFIDENTIAL APPLICATION FOR THE RAYMOND A. JACK OPERATOR SCHOLARSHIP AWARD

This award was established in 2024 in memory of MWWA's Past President Raymond A. Jack. Throughout his career, Mr. Jack sought to raise the level of professionalism of drinking water operators and to enhance their career opportunities. This scholarship honors his legacy as a drinking water operator and instructor, his commitment to education, and his service to MWWA and the drinking water profession. Up to (2) scholarship awards will be presented each year (1 Spring/1Fall) to individuals seeking to obtain a Commonwealth of Massachusetts drinking water operator license (Distribution or Treatment) or to individuals looking to progress in their professional careers by obtaining higher level drinking water operator licenses, with preference given to those candidates who document financial hardship.

Each Award consists of:

- *Course Tuition (value of up to \$900)*
- *Course Textbooks (value of up to \$100 for Distribution or \$200 for Treatment)*
- *Complimentary Mass Water Works Association membership (expires at the end of the full calendar year which follows the award) (value \$80)*

The Scholarship Committee and Board of Directors delegates authority to the Executive Director to select one recipient for the spring semester and one recipient for the fall semester. Recipients must meet the following eligibility requirements:

- *Applicant is pursuing a Commonwealth of Massachusetts Drinking Water Operator License.*
- *Applicant must commit to attending the course through completion.*
- *Applicant must demonstrate a financial hardship exists which would otherwise prevent them or their employer from paying for this training.*
- *Preference will be given to applicants who have not previously received a Raymond A. Jack Scholarship Award, although recipients can apply for courses not previously awarded (i.e. if you got a scholarship to attend the Basic Treatment Course, you may apply for the Advanced Treatment Course in a subsequent semester). To be considered for additional scholarships, the applicant must have successfully passed the prior course taken and show proof of obtaining the license they were seeking. Repeat applications for the same course will not be considered.*

The foregoing may be amended at any time by the Board of Directors at a duly called meeting by a majority vote of those present and voting. MWWA reserves the right to not award any scholarship for any year in which eligible candidates are not identified. MWWA reserves the right to waive certain requirements in exceptional circumstances at the discretion of the Executive Director.

Send completed application to: **MASSACHUSETTS WATER WORKS ASSOCIATION**

**PO BOX 1064
ACTON, MA 01720 or via email to
jpederson@masswaterworks.org**

IMPORTANT!

DEADLINE: DECEMBER 1ST FOR SPRING COURSES; AUGUST 1ST FOR FALL COURSES
(application and supporting material must be postmarked by this date to be considered).

Award decisions will be made by the 15th of the month and award recipient will be notified by email.



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APPLICATION INFORMATION (PLEASE TYPE OR PRINT)

1. Legal name in full: _____
First Name Middle Name Last Name

Home Address: _____
Street and Number

_____ City or Town State Zip

Mailing Address (if different): _____
Street and Number

_____ City or Town State Zip

Phone: _____ Email: _____

2. Current Employer: _____

3. Do you currently hold a Drinking Water License?

a. Yes No

b. If yes, please indicate the highest grade license you hold (Drop Down to Select):

i. TREATMENT:

ii. DISTRIBUTION:

4. What Level Drinking Water License are you seeking?

a. TREATMENT: Grade 1 Grade 2 Grade 3 Grade 4

b. DISTRIBUTION: Grade 1 Grade 2 Grade 3 Grade 4

5. Which course are you seeking a scholarship for?

a. Intro to becoming a Public Water System Operator (D1/T1)

b. Concepts and Practices of Drinking Water Distribution (D1-4)

c. Concepts and Practices of Basic Drinking Water Treatment (T1/T2)

d. Concepts and Practices of Advanced Drinking Water Treatment (T3/4)

6. Date/Location of the course you are seeking a scholarship for:

a. Course starts: _____ Location: _____



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7. Check each item below confirming that your application package includes the following documentation and send each item with your application:

Current Resume

A one-page (maximum) essay that describes your interest in becoming a licensed water operator or progressing your career to obtain higher level drinking water licenses.

A brief explanation of any financial hardship that prevents you from attending this training without this assistance.

Attach one letter from a character reference.

IF APPLICABLE: If you are already working in a Public Water System (PWS) that cannot afford to send you to training to obtain the desired license, please include a letter from your employer documenting the PWS's financial hardship.

Tell us how you learned about this scholarship: _____

By signing below, I attest that the information in this application is complete and that I will remain enrolled through successful completion of the course if I am selected as the recipient. Please sign and date this application:

Signature of Applicant

Date