Verification of Enrollment

Dear Admissions Representative/Registrar:

________________________ is applying for the Mark Landry Memorial Scholarship which is endowed by the Gulf States Shipbuilding Consortium (GSSC). A condition of eligibility for this award is that the applicant be enrolled or plan to be enrolled in a trade school, college, university or other training program that will prepare him or her, at a minimum, for employment in the shipbuilding and repair industry. This information must be included in the applicant’s scholarship application package in order to be considered for the award. The award pays $1,000 toward a recipient’s tuition and fees.

Please complete the information requested below verifying that this individual has been accepted or is currently enrolled in your institution. If the individual is currently enrolled, please provide the total number of hours completed to date along with the course of study in which the student enrolled, if applicable. This form must be uploaded to the applicant’s online scholarship application form.

Thank you,

Byron Dunn, President
Gulf States Shipbuilding Consortium

To be completed by student:

I authorize the above requested information to be released to the Gulf States Shipbuilders Consortium. I understand this information will be used by GSSC’s Board of Directors during the selection process for the Mark Landry Memorial Scholarship.

Student Signature __________________________ Date __________________________

To be completed by Admissions/Registrar:

Student Name __________________________ Institution __________________________

Date __________________________ Location of Institution (City, State) __________________________
Type of Institution:  
☐ Trade School  
☐ Community/Junior College  
☐ University  
☐ Other (Please explain)

Has the student been accepted to your institution? Yes ☐ No ☐ If yes, acceptance date__________

Is this student currently enrolled? Yes ☐ No ☐

If yes, what is the student’s enrollment status? Part-time ☐ Full-Time ☐

If a degree-granting institution, what is the student’s course of study? ________________________________

Number of credit hours completed: ________

If your institution is not degree-granting, what industry certification will the student earn as a result of participation in your training program? __________________________________________

Student (circle one)  
Freshman  Sophomore  Junior  Senior  Other

____________________________________  __________________________________
Signature  Title

__________________________________________  __________________________________
Printed Name  Telephone