



# Niagara Frontier Building Officials Association

## 2014-2015 Officers

### President

David R. Metzger  
Town of Clarence  
6221 Goodrich Rd.  
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(716) 741-8950

### Vice President

Richard Bleichfeld  
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5583 Main St  
Williamsville NY 14221  
(716) 631-7070

### Secretary

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5583 Main St  
Williamsville NY 14221  
(716) 631-7077

### Treasurer

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City of Tonawanda  
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Tonawanda, NY 14150  
(716) 695-1806

### Delegate to NYSBOC

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Hamburg NY 14075  
(716) 649-6111

### Directors

Brian Belson  
Town of Lockport  
6200 Robinson Road  
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### Joe Frese

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Williamsville, NY 14221  
(716) 631-7096

### Jason C. Dool

City of Lockport  
One Locks Plaza  
Lockport NY 14094  
(716) 439-6754

### Correspondence

c/o R. J. Cameron  
Town of Amherst  
Building Department  
5583 Main St.  
Williamsville NY 14221

## Website

[www.nfboa.org](http://www.nfboa.org)

## Scholarship Program

**Introduction:** The Niagara Frontier Building Officials Scholarship Committee has set the following as guidelines and qualifications for Scholarship Awards. Please review below and complete the application for consideration of an award.

### Sponsor/ Applicant

#### Eligibility: Sponsor:

- 1) Active member of NFBOA for a minimum of two (2) years
- 2) Attend a minimum of three (3) association meetings per year as certified by the Secretary

#### Applicant:

- 1) An immediate family relative (Ex: wife, son, daughter) of an active member of the Niagara Frontier Building Officials Association.
- 2) Relative need for a scholarship award.
- 3) First (1st) application – must submit the following (References Only Required 1<sup>st</sup> Year).
  - a) Completed application.
  - b) One (1) letter of personal reference. (First Year Only)
  - c) One (1) letter of business reference. (First Year Only)
- 4) All semester applications shall consist of a completed application and a **CERTIFIED COPY OF THE TRANSCRIPT** from the educational institution verifying a grade point average of C or better.

#### Scholarship Awards:

- 1) Maximum award per year- \$500.00.
- 2) FULL TIME STUDENTS -12 Cr/Hr or More---\$250.00 Pr/Semester.
- 3) PART TIME STUDENTS-Less than 12 Cr/Hr-----\$150.00 Pr/Semester.
- 4) Sessions between semesters shall meet the full or part time criteria.

#### Awards Submittal Process:

- 1) The awards process will be simplified to accommodate one (1) application per year.
- 2) Sponsor/Applicant shall submit applications to the committee between May 15th and August 15th only.
- 3) No applications will be reviewed or awarded after the August 15<sup>th</sup> submittal date.
- 4) The committee will meet after August 15<sup>th</sup> to review and award the scholarships which meet our criteria.

**NOTE: FOR ANY QUESTIONS REGARDING THESE CHANGES, FEEL FREE TO CONTACT ANY COMMITTEE MEMBER.**

RESPECTFULLY SUBMITTED,

MICHAEL MUSCARELLA – CHAIRMAN email: [muscarem@msn.com](mailto:muscarem@msn.com)

ROBERT COULTER - MEMBER 716-297-1790

DAVID METZGER - MEMBER 716-741-8950

# NFBOA Scholarship Application

## Member/Sponsor

PLEASE PRINT

DATE \_\_\_\_\_

Name: \_\_\_\_\_ # Years Member of NFBOA: \_\_\_\_\_

(2 Years Minimum Membership)

Address: \_\_\_\_\_ email: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

**Must Attend 3 Meetings Per Year: (Check Meetings Attended)**

**Jan: \_\_\_\_\_ Mar: \_\_\_\_\_ May: \_\_\_\_\_ July: \_\_\_\_\_ Sept: \_\_\_\_\_ Nov: \_\_\_\_\_**

Member Signature \_\_\_\_\_ Date: \_\_\_\_\_

## Student/Applicant

Name: \_\_\_\_\_ Relationship to sponsor: \_\_\_\_\_

Address: \_\_\_\_\_ email: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Institution Attending: \_\_\_\_\_ Applying for (semester/year): \_\_\_\_\_

Class Year Status Or Program: (Jr, Sr, Masters, etc): \_\_\_\_\_

Has provided **certified copy** of transcript? YES \_\_\_\_\_ NO \_\_\_\_\_

Has provided letters of recommendation ? YES \_\_\_\_\_ NO \_\_\_\_\_

\*I affirm that I have read and understand the conditions under which the scholarship application is accepted, and agree to adhere to them. I also understand that the awards are granted based on statements made as part of the application, and state that all are true to the best of my knowledge and belief.

Student/Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please send completed application to:**

**Michael L. Muscarella**  
**257 Commonwealth Ave**  
**Buffalo NY 14216**  
**Email: [muscarem@msn.com](mailto:muscarem@msn.com)**

### **Committee Use Only**

Active member of NFBOA: Y: \_\_\_ N: \_\_\_

Immediate family member of active member: Y: \_\_\_ N: \_\_\_

Attended min. 3 meetings: Y: \_\_\_ N: \_\_\_

Relative need for scholarship: Y: \_\_\_ N: \_\_\_

GPA minimum of "C" : Y: \_\_\_ N: \_\_\_

Reference Letters: Personal \_\_\_\_\_ Business \_\_\_\_\_

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## **Committee Signatures**

Chairman: \_\_\_\_\_ Date Accepted: \_\_\_\_\_

Chairman: \_\_\_\_\_ Date Accepted: \_\_\_\_\_

Chairman: \_\_\_\_\_ Date Accepted: \_\_\_\_\_