



## About Our Program:

Washington State Department of Transportation Maritime Credential Scholarships are managed through the Office of Equity and Civil Rights. This funding supports efforts to diversify the workforce at Washington State Ferries (WSF) by covering the costs of required credentials for entry-level positions on WSF vessels.

Visit our [website](#) or contact us at [maritimetradeprep@wsdot.wa.gov](mailto:maritimetradeprep@wsdot.wa.gov) or 360-480-4759

Student Information			
Student Last Name		First Name	Middle Initial
Date			
Address		City	State
Zip			
Email		Date of Birth	Gender
What's the highest level of education you've completed?		Do you have a valid Washington State driver's license?	
Are you a veteran?		Have you been involved in juvenile rehabilitation?	
Have you been formerly incarcerated?		Have you ever been in the foster care system?	
Ethnic Origin (check all that apply):			
Black/African American		Latino/Hispanic Native	Other:
Asian		Hawaiian/Pacific Islander	
Caucasian		American Indian/Alaskan Native	
What, if any, barriers are you facing? (check all that apply)			
Currently Un-housed		Lack of Reliable Child Care	Limited English Proficiency
Disability		Substance Abuse	Limited Math Skills
No Dependable Transportation		No High School Diploma or GED	Other:
Organization for Credentials			
Name of Credentialing Organization		Organization email address/phone number	
List out the expected detailed costs:			
		Cost:	
		TWIC	
		MMC	
		Medical Exam	
		Drug Screening	
Other: Please explain			
<b>Total scholarship request:</b>			

## Essay Question

Please describe your interest in working in the maritime industry by answering the questions listed. What type of jobs do you plan to apply for once you receive your credentials? What excites you about the maritime industry? What do you believe qualifies you for this scholarship?

### Applicant must *initial* to certify the below:

I am a Washington State resident.

If I am awarded a scholarship, I agree that any awarded amount will be paid directly to the listed program.

I authorize WSDOT to distribute these funds on my behalf.

By signing below, I certify that, to the best of my knowledge, all statements on this form are true and correct. I also acknowledge that

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

### Title VI Notice to Public

It is the Washington State Department of Transportation's (WSDOT) policy to assure that no person shall, on the grounds of race, color, national origin, as provided by Title VI of the Civil Rights Act of 1964, be excluded from participation in, be denied the benefits of, or be otherwise discriminated against under any of its programs and activities. Any person who believes his/her Title VI protection has been violated, may file a complaint with WSDOT's Office of Equity and Civil Rights (OECR). For additional information regarding Title VI complaint procedures and/or information regarding our non-discrimination obligations, please contact OECR's Title VI Coordinator at (360) 705-7090.

### Americans with Disabilities Act (ADA) Information

This material can be made available in an alternate format by emailing the Office of Equity and Civil Rights at [wsdotada@wsdot.wa.gov](mailto:wsdotada@wsdot.wa.gov) or by calling toll free, 855-362-4ADA(4232). Persons who are deaf or hard of hearing may make a request by calling the Washington State Relay at 711.