

Joint Council of Teamsters No. 7 Scholarship Application

The following criteria will be considered for scholarships: Academic achievement, school and community service and financial need.

ELIGIBLE APPLICANTS:

Applicants are eligible for scholarships when a parent or legal guardian (proof may be required) is an active member in good standing with one of the following Teamsters Local Unions that are affiliated with Joint Council 7: Local 70, 87, 137, 150, 287, 315, 350, 386, 431, 439, 517, 533, 601, 665, 853, 856, 890, 896, 912, 948, 2010, 2785 District Council 2. Elected officials and employees of Teamsters Local Unions and Joint Councils, and their families, are not eligible.

REQUIREMENTS:

1. Grade point average of 2.0 (based on a 4.0 system) upon high school graduation.
2. The scholarship is to be used for scholastic and vocational fields only.
3. Applicant must submit a resume of school and community activities. Include a copy of transcript through your most recent semester.
4. Applicant must submit a two-page, handwritten or typed essay on the topic: "The Importance of Labor Unions."
5. A recent photo must accompany applications.
6. ALL OF THE ABOVE MUST BE COMPLETED OR YOU WILL BE DISQUALIFIED.
7. Application must be returned and postmarked no later than **July 1**.

HOW TO APPLY:

Complete the Application below and submit to any Local Union affiliated with the Joint Council (see above) or the Joint Council office in San Francisco, WITH each of the required items listed above (i.e., resume, transcript, essay, and photo), received or postmarked no later than July 1 of the year for which scholarships will be granted. It is anticipated that awards will be announced in late summer so the money will be available for classes in the fall.

TEAMSTER LOCAL UNION MEMBER:

Local Union No.: _____

Name: _____

Address: _____ City: _____

State/ZIP: _____

Phone: (____) _____ Soc.Sec. _____

APPLICANT/STUDENT:

Check box that applies: Current High School Student College Student Continuing College

Applicant/Student Name: _____ DOB ____/____/____ Age _____

Soc.Sec. _____

Address: _____ City: _____ State/ZIP: _____

School Currently Attending: _____ Date of Graduation: _____

Father's Name: _____

Address: _____ City: _____ State/ZIP: _____

Phone: (____) _____ Employer: _____ Position: _____

Mother's Name: _____

Address: _____ City: _____ State/ZIP: _____

Phone: (____) _____ Employer: _____ Position: _____

COLLEGE OR INSTITUTION: Applying (attach complete list) Accepted Attending

Name of Institution: _____ Address: _____

City/State/ZIP: _____

Date you plan to start ____/____/____

Course of Study: _____ Degree/Certificate Objective: _____

Desired occupation after graduation: _____

List all scholarships/grants applied for: _____

Briefly outline your anticipated expenses (tuition, books, housing, etc.) _____

Briefly outline how you are going to offset these expenses: _____

The above statements are correct and true. All scholarship monies may be restricted to reimbursement for scholarship expenses upon submission of receipts for costs incurred. I have read and understand the above and agree to abide by its content.

Applicant's Name

PRINTED: _____

Signature: _____

Parent/Member's Name

PRINTED: _____

Signature: _____

Dated: ____/____/____

**MUST BE RECEIVED AT LOCAL UNION OFFICE
OR BE POSTMARKED NO LATER THAN JULY 1**