

TEAMSTERS LOCAL 315 SCHOLARSHIP APPLICATION

APPLICANT INFORMATION								
Name:								
Date of birth:	SSN:		F	Phone:				
Current address:								
City:	State:		7	ZIP Code:				
E-mail Address:								
Employer of Applicant (if applicable):								
Address:								
City:	State:		Z	ZIP Code:				
Monthly Income:	Household Far		amily S	imily Size:				
Other Income & Source:								
Please describe your financial need:								
ACADEMIC INFORMATION								
College attending:			1					
College Units Completed:			Units in Progress:					
Cumulative GPA:	M	Major:						
Do you plan to earn an AA Degree?			BA Degree?					
High School last attended:			GPA:					
Please list your hobbies and interests:								
Special Awards/Accomplishments:								
Community/Labor Union/Volunteer Activities:								

Attach additional information on a separate sheet of paper.



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MEMBER INFORMATION							
Nar	ne:						
Relationship to Applicant: Self () Father () Mother () SSN:				SSN:			
Ado	lress:						
City: State:		ZIP Code:					
Employer:							
City	7 :	State:	ZIP Code:				
Membership Status: Active () Retired () Honorable Withdrawal () Transfer ()							
PART II – PERSONAL ESSAY							
Please submit an essay that includes the following:							
A How you plan to use the scholarship award if you are selected.							
B Your future career goals.							
C Your knowledge and/or experience with labor unions.							
D Your perception of the influence of labor unions on working life in the United States.							
Essay MUST be a minimum of 4 double-spaced pages, and a maximum of ten double-							
spaced pages.							
PART III – RECOMMENDATION							
You must submit two (2) letters of recommendation from a faculty member at your high school, community college, or accredited college; and/or a community leader, employer, activity coach, etc., other than a relative or personal friend. The recommendation should evaluate the applicant in the areas of responsibility, dependability, initiative, leadership, and character.							
Apr	olicant's signature:			Date:			

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