# LOCAL 210 SCHOLARSHIP AND EDUCATION FUND 55 Broad Street 11th Floor NEW YORK, NY 10005 (212) 757-3463 Fax (212) 459-9674

### WHO IS ELEGIBLE FOR SCHOLARSHIP

- An Employee (member) of a company that contributes to the fund.
- The member's spouse
- Dependent children

## SCHOLARSHIPS ARE AWARDED FOR THE FOLLOWING:

- Four year or two year undergraduate degree programs
- Trade schools, secretarial, and Business schools
- Certificate programs that provide skills needed for job advancement

Scholarships are awarded on an annual basis. Scholarship winners who continue their education reapply annually.

## **INSTRUCTIONS FOR COMPLETING APPLICATION:**

If you expect to attend school starting this fall or the next winter or spring terms you must complete and return this application.

- 1. Local 210 members must complete and **answer all questions** in Section I of the application. Members must sign the "Member's Certification".
- 2. Applicants must complete Section II. Your application is not complete until we receive all of the following.

### Two year or four year College Student

• Bursar's receipt including:

Tuition costs

Room and Board expenses, if applicable.

Financial Aid received.

Loans to pay college expenses

Grants and Scholarships received.

- High School Transcripts or College transcripts
- Copies of awards, honors, and recommendations received.
- A list of extra curricular and community services with supporting letter(s)

### Students of short -term Vocational or professional training program

- Bursar's enrollment verification receipt.
- Course/program description and its duration

Note: This information will help Local 210 determine the amount of grant you receive.

P.S. Please answer "all" questions to avoid delays.

#### LOCAL 210'S MEMBERS MUST COMPLETE THIS SECTION

Date 1. Member's name Middle Last First 2. Members Address State Zip Code City Telephone #\_\_\_\_\_ C e11 #\_\_\_\_\_ Email \_\_\_\_\_\_\_Please include an email for quick contact and award notification. 3. Employed by (Company name) \_\_\_\_\_ 4. Name of your Union Representative\_\_\_\_\_ 5. Has Applicant ever applied for a Local 210 Scholarship? Yes No If yes list years and amounts of awards. 6. Are you paying tuition and / of college room and board for other family members? Yes No If yes, submit a separate sheet listing names of other family members, their relationship to you, school or college attended. Tuition and other fees. You must enclose receipts from the college to receive credit for these costs. 7. Member's gross yearly wages or salary \$ \_\_\_\_\_ Other Household Income? 8. If member is the applicant, do your parents support you? Yes \( \subseteq \text{No} \subseteq \) Indicate total family income. 9. Number of children reported to IRS as your dependents 10. Do you report other family members to IRS as your dependent? List name(S) and relationship:

## **MEMBER'S CERTIFICATION**

I hereby certify that the information provided to the Local 210's Scholarship Fund is true, correct and complete.

MEMBER'S SIGNATURE		DATE:	
COLLEGE OR TE			S (STUDENT)
1. Applicant's name			
2. Applicants home or camp	ous address		
City	State	Zip Co	ode
Telephone # ( )	Cel	1 phone# ( )	
Email Please include an email for quick contact and award notification.			
Relationship to member		Last Digit	of S.S.N
3. Name of college or Trade s	school		
4. Are you a full timeo	r part time studer	nt? Date of Birtl	n
5. How many credits comp	leted if any	Career Goal	1
6. Did you work last year?	Part time	or full time	Earnings \$
7. How many credits will yo	ou take(Fall) _	(Spring)_	

To avoid delays please make sure that you have answered all questions.