

# AFGE Local 2519 Scholarship Application

Application Deadline: March 15, 2010

All information requested must be provided by applicant. Read all instructions carefully before completing. Please type or print clearly.

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| <p><b>Personal Information</b></p> <hr/> <p>Name _____</p> <hr/> <p>Home Address _____</p> <hr/> <p>City _____ State _____</p> <hr/> <p>Zip Code _____</p> <hr/> <p>Telephone _____</p> <hr/> <p>Date of Birth: ____/____/____</p> | <p><b>Union Affiliation</b></p> <p>Are you a member of AFGE Local 2519? ____ Yes ____ No</p> <p>Your Home E-mail Address _____</p> <p>Who else in your family is a member of AFGE Local 2519?</p> <p>____ Spouse Name _____<br/>         Home E-mail Address _____<br/>         Member Since _____</p> <p>____ Mother/Father Name _____<br/>         Home E-mail Address _____<br/>         Member Since _____</p> <p>____ Grandparent/Uncle/Aunt Name _____<br/>         Home E-mail Address _____<br/>         Member Since _____</p> |
| <p><b>By June 2010, I will have completed</b></p> <p>____ High school</p> <p>____ 1<sup>st</sup> year college</p> <p>____ 2<sup>nd</sup> year college</p> <p>____ 3<sup>rd</sup> year college</p>                                  | <p><b>In the fall of 2010, I plan to attend</b></p> <p>____ Community college or junior college</p> <p>____ College or university</p> <p>____ Trade or technical school</p>   |

**Scholarship Eligibility**

1. Union members, spouses, dependent children (as defined under IRS regulations), grandchildren and nieces and nephews are eligible to apply. However, no person shall be eligible to win the scholarship two consecutive years in a row.
2. Current membership in AFGE Local 2519, and continuous membership in AFGE for not less than one year as of March 15, 2010, is required.
3. Acceptance into an accredited college, university, community college, or technical or trade school at the time of the award is required. Graduate students are not eligible.
4. Applications must be postmarked not later than March 15, 2010 in order to be considered.
5. Applicants wishing to receive confirmation of receipt of their applications may send a self-addressed, stamped postcard along with the application.
6. Officers and stewards of AFGE Local 2519 will not be able to advise applicants of the status of their applications.
7. Only winners will be sent notification on or before May 31, 2010. Scholarship checks will be made payable to the institution of higher learning in which each winner is enrolled or to a recognized entity within that institution.

## Award Criteria

Awards will be based on academic achievement and potential, character, leadership, social awareness, career goals and financial need. Significant weight will be given to the required essay. Applications will be judged by an impartial, professional educator or a committee thereof.

## Application Instructions

1. This application must be completed by the applicant.
2. All application requirements must be met and all information must be provided for the application to be considered.
3. Enclose with your application **one sealed letter of reference** from a teacher or other adult who is familiar with your achievements and abilities. Instruct your reference to sign his/her name across the seal of the envelope. **Applications without letters of reference will not be considered. Do not send letters of reference separately.**
4. Attach an essay of 600-800 words on the topic: **Unions help make America's middle class. Unions are needed if we're restore the eroding middle class.** Essays of scholarship applicants may be published in the AFGÉ Local 2519 newsletter. **Applications without an essay will not be considered. Do not send essays separately.**
5. The Union Membership Verification Form must be completed and signed by the member applicant or the member spouse or parent of the applicant. **Applications without the verification form will not be considered. Do not send verification form and application separately.**
6. Review and complete the scholarship certification on page 4 of this application.
7. Retain a copy of the completed application for your files.

## Educational Background

| Name of Institution | Location of School (City/State) | Attendance Dates (Month/Year) | Major/Field | Degree/Diploma Date (Month/Year) | Grade Point Average*<br>Ex: 3.9 GPA | Class Rank/<br>Class Size |
|---------------------|---------------------------------|-------------------------------|-------------|----------------------------------|-------------------------------------|---------------------------|
|                     |                                 |                               |             |                                  |                                     |                           |

*\*If you are selected as a scholarship recipient, you will be required to verify your grade point average before receiving the award. You will be asked to supply a certified copy of your high school record transcript or if you have been enrolled in a college or trade school for at least one year, a certified transcript from your school. **Scholarship awards are to be used during the 2010-2011 school year.***

## SAT or ACT Scores

Test Taken: \_\_\_\_\_ Date Taken: \_\_\_\_\_ \*Scores: Verbal \_\_\_\_\_ Math \_\_\_\_\_ Total \_\_\_\_\_

\_\_\_\_\_ Tests not required for my school

*\*Scholarship recipients will be required to verify test scores prior to receipt of awards*

## Schools to which you have applied:

**Check if Accepted**

1<sup>st</sup> Choice: \_\_\_\_\_ Location: \_\_\_\_\_

2<sup>nd</sup> Choice: \_\_\_\_\_ Location: \_\_\_\_\_

3<sup>rd</sup> Choice: \_\_\_\_\_ Location: \_\_\_\_\_

**Estimated Financial Need**

List the total anticipated amount you will need for the year. Include the cost of tuition and expenses such as books, transportation and housing.

\$ \_\_\_\_\_

List the financial aid benefits you will be receiving, such as partial scholarships provided by the school, an alumni association, the government or other groups.

Source: \_\_\_\_\_

Minus \$ \_\_\_\_\_

Source: \_\_\_\_\_

Minus \$ \_\_\_\_\_

List funds you will receive from any other source, such as parental assistance, employment or gifts.

Minus \$ \_\_\_\_\_

Calculate the new amount you will need by subtracting your funding (from financial aid and any other sources listed above) from your total amount needed.

Net Amt. Needed \$ \_\_\_\_\_

Please provide any additional information that you believe would be helpful to the Scholarship Committee in assessing your financial need.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Employment/Awards/Activities**

Please provide information on any employment you have held. Attach additional sheets if needed.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please provide information on your employment and/or professional goals.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please provide information on any special honors or awards you have received.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please provide information on extracurricular or outside activities (clubs, sports or volunteer work) in which you have participated.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Letter of Reference

Please include one sealed recommendation letter from a teacher or other adult who is familiar with your achievements and abilities. Instruct your reference to sign his/her name across the seal of the envelope. **Applications without letters of reference will not be considered.**

## Essay

Please submit an essay of 600-800 words on the topic: **“As the numbers of Union members have lessened, the American middle class has been increasingly threatened.”** The essays of scholarship winners may be published in the AFGE Local 2519 newsletter. **Applications without essays will not be considered.**

## Certification

**I, the undersigned, certify that all of the information I have included in and with my application is true. I understand that if I am selected for an award, I may be required to submit further proof of my Union membership or my relationship to a Union member and of my acceptance to or enrollment in an accredited college, community college, university or recognized trade school. Further, I understand that official verification will be required of my attained grades and test scores. I understand that if I am awarded a scholarship, I will be required to provide a recent photograph to AFGE Local 2519 for possible publication. I agree that if I am selected for an award, my name and/or photograph may be used for publicity purposes with no additional compensation by the sponsors of this scholarship program. I also certify that I have read and understand the information above.**

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Signature

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Date

## Union Membership Verification Form

This form must be completed by the applicant and signed by the Union member and submitted together with the application in order to qualify for an AFGE Local 2519 scholarship. The Union Member, whose name appears below, must be one of the following:

- The scholarship applicant
- The spouse of the Union member
- The dependent child of the Union member
- The granddaughter or grandson of the Union member
- The niece or the nephew of the Union member

**Name of Scholarship Applicant:** \_\_\_\_\_  
(Please type or print clearly)

**Union Member Verification:**

I, \_\_\_\_\_ verify that I have been a member in good standing of  
Name of union member

AFGE Local 2519 since approximately \_\_\_\_\_.  
Month/Day/Year

\_\_\_\_\_  
Signature of Union member

\_\_\_\_\_  
Date

## **Application Checklist**

Use this checklist to complete your application. All materials must be submitted with this application. Materials sent separately will not be considered. Your application will not be considered if it is incomplete.

\_\_\_ Complete all sections of the application.

\_\_\_ Letter of reference. One sealed recommendation letter. Instruct your reference to sign his/her name across the seal of the envelope. Send the letter with the application in order to be considered.

\_\_\_ Essay must be sent with the application in order to be considered.

\_\_\_ Union Verification Form must be sent with application in order to be considered.

\_\_\_ If you wish to receive confirmation of receipt of your application, send a self-addressed, stamped postcard along with the application.

\_\_\_ Review and sign the application.

\_\_\_ Retain a copy of the completed application for your files.

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**Applications must be postmarked not later than March 15, 2010**

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Mail application package to:  
**Sandi Walters**  
**AFGE Local 2519 Scholarship**  
**3750-A Airport Blvd #257**  
**Mobile, AL 36608**

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