

TWO-YEAR COMMUNITY COLLEGE, TECHNICAL, OR TRADE SCHOOL APPLICATION

Please check one.

I am applying as a: Traditional Student Non-Traditional Student

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treet Address:		
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CADEMIC		
ligh School:		
City:	Sind official high school transcript in a sea	tate: Zip:
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EMPLOYMENT (CONTINUED)

Employer:		
Employer Address:		
Primary Responsibilities:		
Start Date:	End Date:	Hours per week:
Reason for leaving:		
COMMUNITY SERVICE List your present or most recent s		
Organization:		
Primary Responsibilities:		
		Hours per week:
Organization:		
Organization Address:		
Primary Responsibilities:		
Start Date:	End Date:	Hours per week:
Organization:		
Organization Address:		
Primary Responsibilities:		
Start Date:	End Date:	Hours per week:
EDUCATION PLAN As indicated by the attached copi enroll at:	es of my acceptance letters or e	nrollment receipts, I have been accepted and intend to
School: (First Choice)		City, State:
School: (Second Choice)		City, State:
School: (Third Choice)		City, State:

ESSAY

Submit an essay addressing the following topic: Which industries could most benefit by workers joining together in unions and negotiating collectively? Why?

The essay should be 3-5 pages in a Times-style font, 12-point typeface, double spaced, with one-inch margins. A bibliography of references should be attached; the bibliography does not count in the 3-5 page requirement. Do not include your name anywhere on the essay. Attach the essay to the end of your completed application packet.

Plaajarizina or otherwise presentina another person's work as your own is unacceptable and will result in disqualification

from the scholarship competition.	ns anacceptuole and win result in disquamication
CERTIFICATION I, the undersigned, certify that all of the information that I have included in I am selected for an award, I may be required to submit further proof of my school or program as indicated on this form. I agree that if I am selected for program may use my name, photograph, and/or essay for publicity purpo and understand the above information.	y financial need and/or of my acceptance within a or an award, the sponsors of this scholarship
Signature of Applicant	Date

if



Union Representative Signature

MEMBERSHIP VERIFICATION

Date

All scholarship applicants must complete this form. Membership must be verified by your UFCW Local 700 Union Representative; the Scholarship Committee cannot verify your union membership.

Please note that membership verification is part of the scholarship application packet. Applicants who do not submit a complete packet will be disqualified from consideration.

APPLICANT INFORMATION Last name: _____ First name: _____ Middle Initial: Phone: () Email address: Is the applicant a member of UFCW Local 700? Yes No If no, please proceed to Member Information to verify union membership. If yes, please complete employer information below. MEMBER INFORMATION Last name: First name: Middle Initial: Phone: () Email address: Work location/Store No. Employer: Relationship to scholarship applicant: UNION REPRESENTATIVE VERIFICATION The membership information above is true and complete to the best of my knowledge.



SCHOLARSHIP PACKET CHECKLIST

Before sending your application, be sure all items are complete and included:

Application Form

Official high school transcript in a sealed envelope, verified by school (traditional students only)

Acceptance letter(s) or enrollment receipt

UFCW Local 700 Membership Verification form

Essay

Sign all forms

Materials postmarked or emailed no later than December 30, 2022

Submit your completed application packet to: UFCW Local 700 Scholarship Fund, c/o UFCW Local 700 3091 E. 98th St, Suite #150 Indianapolis, IN 46280

OR

Email to jshay@fufcw700.org