

LOCAL 294 TEAMSTERS CARE SCHOLARSHIP
2017 APPLICATION

Please print or type all information. All applications must be sent to the following address:
"Local 294 Teamsters Care Scholarship" c/o Teamsters Local 294, 890 Third Street, Albany, NY 12206

The deadline for all applications is May 22, 2017

NAME/STUDENT _____			
(Last)	(First)	(Middle Initial)	
HOME ADDRESS _____			
CITY _____		STATE _____	ZIP CODE _____
AGE _____	SEX _____	PHONE # _____	EMAIL _____

HIGH SCHOOL _____
DATE OF GRADUATION _____
HIGH SCHOOL GUIDANCE COUNSELOR _____

COLLEGE APPLIED TO _____
SECOND CHOICE _____

TEAMSTER PARENT _____
TEAMSTER PARENT SOCIAL SECURITY# _____
EMPLOYER _____
EMPLOYER ADDRESS _____

All Applications must include the following:

1. A current copy of the applicant's high school transcript with GPA.
2. Results of either the ACT or SAT, preferably both.
3. Proof of acceptance at an accredited institution of higher learning.
4. A letter of recommendation from the applicant's guidance counselor that details the applicant's academic achievements, extra-curricular activities involvement with community affairs, outside and summer employment, any exceptional handicaps that the applicant may possess.
5. Additional information may be provided by a parent/guardian in the form of a letter.

APPLICANT'S SIGNATURE _____

PARENT'S SIGNATURE _____