

2018

*United Food and Commercial
Workers Union Local #7*

Scholarship Application



2018

UNITED FOOD AND COMMERCIAL WORKERS UNION LOCAL #7 SCHOLARSHIP APPLICATION

The following requirements will govern the acceptance of your application as a candidate for a UFCW Local 7 Scholarship Award in **2018**. Please read the instructions carefully and complete all forms.

1. **This scholarship is open to all UFCW Local 7 members, their spouse, children, grandchildren and legal wards. The member must be in good standing for at least one year prior to April 1, 2018. Scholarship is also open to Local 7 retirees in good standing for one (1) year prior to their official retirement date, their spouse, children, grandchildren and legal wards.**

2. Applicants must complete ALL sections of the scholarship application, essay and "Academic and Enrollment Verification," and sign Release Form. Sign and date the application where indicated. Only completed applications will be considered.

3. If under 18 years of age, your parent or guardian must sign the Authorization of Release of Information prior to submission.

4. Section "Academic and Enrollment Verification" must be completed by your principal or academic counselor and returned to UFCW Local 7.

5. Attach a letter of recommendation written by a member of your community whom you respect and admire. For example - your coach, counselor, community leader, pastor, teacher/professor or supervisor.

6. Completed applications must be postmarked on or before **APRIL 1, 2018**.

7. Mail or fax applications to:

United Food and Commercial Workers Union Local 7
Scholarship Program, Attention Gwen Maynard
7760 West 38th Avenue, Suite #400
Wheat Ridge, CO 80033

Phone 303-425-0897 or 800-854-7054
Fax number 303-422-4676 or 303-424-2416
Email: gmaynard@ufcw7.com

If faxing, put name
on each page

Your Name _____

8. Applicants may apply each year they are eligible, under the terms and conditions of the scholarship program.

9. The decision of the scholarship committee is final.

APPLICANT INSTRUCTIONS

ALL APPLICANTS MUST BE:

- A. A graduating high school senior in 2018, *or*
- B. Enrolling or presently enrolled in a college or university, *or*
- C. Enrolling or presently enrolled in an accredited technical school, *or*
- D. Enrolling or presently enrolled in an online distance learning program through an accredited college or university.
- E. Recipients may be enrolled as full-time or part-time students.
- F. Recipients must NOT have a "probationary-student" designation.

Scholarship award winners must meet one of the above conditions to secure payment of the scholarship funds.

SCHOLARSHIP AWARDS

- ONE (1) \$3,000 Scholarship Award
- TWO (2) \$2,000 Scholarship Awards
- SIX (6) \$1,000 Scholarship Awards

Scholarship winners will be notified in writing by July 1, 2018. Scholarship winners are encouraged to accept their scholarship certificate in person at a regularly scheduled membership meeting in their area. The monetary award will be submitted directly to the college/university/technical school.

Your Name _____

ESSAY INSTRUCTIONS

Choose one of the following topics and write an essay on that topic. Essays must be at least 500 words, and typewritten. Support your essay with research. List all sources.

- If you have previously submitted an essay, you must choose a topic different from your previously submitted essay.

Winners will be judged on the following criteria:

- A. Essay - content, creativity, grammar, documentation of resources.
- B. Applicant - personal qualifications, achievements, merit, leadership ability and union principles.

ESSAY TOPICS *Choose **ONE***

Choose **one**:

- A. In view of the current social and economic conditions, how does one of the following issues affect Labor Union Members and their future?
 - a) Workplace sexual harassment
 - b) Immigration and education
- B. Pick a major news story that has come out of the current administration (the President and/or his staff). Tell us how and why Unions are necessary in resolving the issue.
- C. You are a syndicated blog writer in a state that has recently become a Right to Work State. Tell us how this law will affect the future of your community and/or state?

Your Name_____

DEMOGRAPHIC INFORMATION
Please type or print legibly

Name_____

Last four (4) digits of Social Security Number_____

Street Address_____

City and State_____ ZIP Code _____

Telephone number (Home)_____ (Cellular)_____

Email Address_____

Who is the UFCW Local 7 Member in good standing or Lifetime Retiree? Check all that apply.

- I am
- My father
- My mother
- My spouse
- My legal guardian
- Lifetime retiree
- My grandparent

UFCW Local 7 Member information:

Relationship to Applicant_____

Member's Name_____

Member's last four (4) digits of Social Security Number_____

Occupation_____

Company_____

Years of Service_____

Phone Number_____

List other UFCW members and their relationship to you if applicable.

EDUCATIONAL BACKGROUND

Your Name _____

Name of School	Location	Dates Attended
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

High school student - anticipated graduation date _____

College/University/Technical School/Online Learning Program you are planning to attend _____

Location _____

What is your area of study? _____

What are your career goals and aspirations, please elaborate?

PERSONAL BACKGROUND

Your Name _____

Give specific information of activity, dates, offices held, and your role in the event or organization. What did you learn or gain from being in this activity? You may attach additional sheets if necessary.

A. List personal achievements, school activities, sports, clubs and organizations, church activities.

B. List leadership activities, community activities, political activities, and volunteerism.

C. List work experience.

D. List hobbies and interests.

Your Name _____

E. What was the last book you read for enjoyment and why did you like or dislike it?

F. Additional information you would like the UFCW Local 7 Scholarship Committee to know about you.

I hereby certify that all information provided in this application is true.

Signature of Applicant

Date

Signature of UFCW Local 7 Member in
good standing or Lifetime Retiree

Date

ACADEMIC AND ENROLLMENT VERIFICATION

Your Name _____

Your principal, academic advisor or counselor should complete this section.

Applicants currently enrolled in an accredited college, university, technical school, or online distance-learning program, please ask the Dean of Admissions to complete this section.

The student whose signature appears below is applying for a scholarship through the United Food and Commercial Workers Local 7 Scholarship program.

- Please submit verification that this student is graduating from high school in **2018**, and/or has been accepted into the institution of higher education listed below by mail or fax **no later than April 1, 2018**, to:

United Food and Commercial Workers Local 7
Scholarship Program, Attention Gwen Maynard
7760 West 38th Avenue, Suite #400
Wheat Ridge, Colorado 80033

Phone 303-425-0897 or 800-854-7054, extension 399
Fax to 303-422-4676 or 303-424-2416
Email: gmaynard@ufcw7.com

Name of Applicant Applicant's last four (4) digits of Social Security #

Signature of Applicant

High School or Institution of Higher Education

Date of Graduation or Date of Enrollment

Signature of Principal, Academic Advisor, Counselor or Dean of Admissions

Title

Date

Your Name _____

Authorization for Release of Information

Under the Federal Privacy Rights of Parents and Students Act, a school must have signed authorization before releasing information about a student. Student and parent/legal guardian (if student is under 18 years of age) should sign and date this authorization.

Permission is hereby given to school officials to release the secondary school record or college, university, technical school, or online distance learning program record, and other requested information for consideration in the UFCW Local 7 Scholarship Program.

Applicant's Printed Name

Last four (4) digits
of Social Security #

Applicant's Signature

Date

Parent or Legal Guardian's Printed Name
(if applicant is under 18 years of age)

Date

Parent or Legal Guardian's Signature
(if applicant is under 18 years of age)

Date

Your Name _____

LETTER OF RECOMMENDATION

Applicant, please attach a letter of recommendation written by a member of your community whom you respect and admire; for example, your coach, counselor, community leader, teacher/professor, pastor, or supervisor.

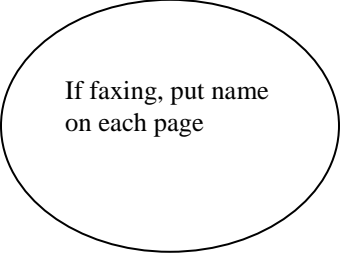
SUBMIT APPLICATIONS

Please ensure that ALL parts of your application are postmarked by the deadline, and received by the scholarship committee.

Submit this application, your essay, academic and enrollment verification, authorization of release of information (also signed by a parent or legal guardian if you are younger than 18 years old), and written letter of recommendation, by mail or fax to:

United Food and Commercial Workers Local 7
Scholarship Program
Attention: Gwen Maynard
7760 West 38th Avenue, Suite #400
Wheat Ridge, Colorado 80033

Phone 303-425-0897 or 800-854-7054, ext. 399
Fax to 303-422-4676 or 303-424-2416
Email: gmaynard@ufcw7.com



If faxing, put name
on each page

Completed applications must be postmarked on or before **APRIL 1, 2018**. Late applications will not be accepted nor considered.

If you have questions please call **303-425-0897, ext. 399**.

Thank you and GOOD LUCK!