

International Association

of

Machinists and Aerospace Workers

Local 2782

1428 West 8th Phone: (417)256-0708

PO Box 1321 Fax: (417)256-9144

West Plains, MO

65775

**Application for Scholarship**

**Amount of Scholarship: $500**

**Scholarship may be applied to college or trade school.**

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|  |  |  |  |
| **Last** | **First** | **Middle** | **Sex** |
| **Street** |  |  |  |
| **City** | **State** | **Zip** |  |
| **Date of Birth** | **Social Security Number** |  | **Most Recent**  **Cumulative GPA** |

**Name:**

**Address:**

**Parent or Guardian:**

**Number of People Living at Home (Children plus parents and any other dependents):**

**Name and Address of the College or Institution you plan to attend:**

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**Probable Occupation Choice:**

**Length of Program:**

**Please list all significant school activities, including offices held.**

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**Please list all scholastic honors or awards you received during high school.**

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**Please list all community and church activities in which you participated.**

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**Please list all hobbies and interests.**

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**Employment Record**

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| **Year** | **Company** | **Type of Work** | **Hours per Week** | **Supervisor** |
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**Please list any unusual home circumstances, due to various reasons either current or anticipated, which have a significant bearing on the family income.**

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**Narrative:**

**On a separate sheet of paper, in narrative form, describe your services in the community, school, and church. Please include names and addresses of two reputable people who will substantiate the statements made in regard to service.**

**Union and Your Family:**

**On a separate sheet of paper, give a brief history of the International Association of Machinists and Aerospace Workers Union and what labor unions have meant to you and your family.**

**Signature of Parent:**

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| --- | --- | --- |
|  | **Date:** |  |

**Signature of Student:**

|  |  |  |
| --- | --- | --- |
|  | **Date:** |  |