

NATIONAL POSTAL MAIL HANDLERS UNION

DIVISION OF LABORERS' INTERNATIONAL UNION OF NORTH AMERICA



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APPLICATION FOR SCHOLARSHIP LOCAL 304

NAME: _____
LAST FIRST MIDDLE

ADDRESS: _____
STREET CITY STATE ZIP CODE

TELEPHONE: (_____) _____ DATE OF BIRTH ____/____/____
M M DD YEAR

SOCIAL SECURITY # _____

NAME OF HIGH SCHOOL ATTENDED: _____

GRADE POINT AVERAGE (GPA) OR GED SCORE: _____

ON AN ATTACHED SHEET, PLEASE GIVE NAME, ADDRESS AND TELEPHONE NUMBER(S) OF ACADEMIC INSTITUTION THAT YOU WILL BE ATTENDING DURING 2022-2023 SCHOOL YEAR.

WILL YOU BE ATTENDING FULL-TIME? YES NO

SAT SCORE ACT SCORE _____ FIELD OF STUDY: _____

FATHER: _____ MOTHER: _____

NPMHU MEMBER SSN: _____

BRANCH: _____ TELEPHONE # (____) _____

Attach an ESSAY to the application with a minimum of 200 words about,
"WHAT DO YOU WISH TO ACCOMPLISH IN THE FIELD YOU'RE INSPIRED TO BE IN?"

I, the applicant, by signing below, state that I have applied or an enrolled in an undergraduate program in a college or university for the fall year in which the scholarship is awarded and that a parent or legal guardian is a member in good standing with the National Postal Mail Handlers Union, Local 304. I, the applicant agree that should I become a successful candidate for the NPMHU Local 304 scholarship, I hereby give permission to the NPMHU Local 304 to publish my name, photograph and essay.

Signature of Applicant

Date

Signature of Parent or Guardian

Date