

LOCAL 13 INDUSTRY ADVANCEMENT PROGRAM SCHOLARSHIP

DEAR APPLICANT,

THE SCHOLARSHIP COMMITTEE OF THE LOCAL 13 IAP SCHOLARSHIP FUND IS VERY HAPPY THAT YOU ARE MAKING AN APPLICATION. WE ASK THAT YOU READ THE APPLICATION AND HAVE THE ATTACHED FORMS FILLED OUT PROPERLY AND RETURN TO THE SCHOLARSHIP COMMITTEE LISTED BELOW.

1. FORMAL APPLICATION WITH SIGNATURE OF PARENT.

- *The applicant must reside with the legal parent and/or guardian who is a member of Local #13 (this includes stepchildren).*
- *Grandchildren of Local #13 members are not eligible.*
- *This scholarship is only available to children of Local #13 members who are contributing to the Industry Advancement Fund that is part of their fringe benefit package.*

2. A **PERSONAL LETTER** SETTING FORTH YOUR WORTHINESS AND CONSIDERATION.

“WHY YOU FEEL YOU SHOULD RECEIVE THE SCHOLARSHIP”

3. A SUMMARY OF YOUR SCHOOL ACTIVITIES AND ACHIEVEMENTS.

4. HAVE YOUR HIGH SCHOOL FORWARD YOUR ACADEMIC RECORD FOR THREE AND ONE-HALF (3 ½) YEARS TO THE LOCAL UNION COMMITTEE NO LATER THAN.... **March 19, 2010**

5. YOUR APPLICATION SHOULD BE PRESENTED TO THE LOCAL UNION COMMITTEE NO LATER THAN ...**March 19, 2010**
6. THE RECIPIENT OF THE SCHOLARSHIP HAS ONLY ONE YEAR TO USE THE SCHOLARSHIP MONEY (ex: school year begins in September, the recipient has until the following September to use the scholarship money).
7. THE SCHOLARSHIP MONEY IS APPLICABLE TO **FULL TIME** COLLEGE STUDENTS ONLY.
8. THE SCHOLARSHIP MONEY WILL BE SUBMITTED TO THE COLLEGE THAT THE RECIPIENT IS ATTENDING. MONEY WILL NOT BE REIMBURSED TO THE STUDENT OR PARENTS.
9. UPON RECEIVING THIS APPLICATION PLEASE TAKE CARE OF IT AS SOON AS POSSIBLE.
10. SCHOLARSHIP AWARD CERTIFICATES WILL BE PRESENTED AT THE UNION PICNIC HELD IN JULY OF EACH YEAR.

THANK YOU,

UA LOCAL 13 INDUSTRY ADVANCEMENT FUND COMMITTEE

COMMITTEE ADDRESS:

**U.A. LOCAL #13 IAP FUND
1850 MT. READ BLVD.
ROCHESTER, NY 14615**

TRUSTEES:

JOHN PERTICONE	TOM LOWERY
BILL KURTZ	ERICH POSTLER JR.
BRANDON TUMIA	GAVIN BROWNLIE

ATTENTION: SCHOLARSHIP COMMITTEE

There is No Substitute For A Skilled Craftsman

APPLICATION FOR THE "INDUSTRY ADVANCEMENT PROGRAM" SCHOLARSHIP FUND
(LOCAL #13/MCA)

NAME: _____ AGE: _____

ADDRESS: _____

SCHOOL NAME & ADDRESS: _____

SCHOOL PRINCIPAL: _____

SCHOOL OR COLLEGE PLANS TO ATTEND: _____

COURSE APPLICANT PLANS TO TAKE: _____

HIGH SCHOOL GRADUATION DATE: _____

LOCAL 13 MEMBERS NAME, _____

ADDRESS: _____

I do so declare on my honor that the answers given in this scholarship application are true and to the best of my knowledge.

SIGNATURE OF APPLICANT: _____

SIGNATURE OF PARENT: _____

DATE: _____

INDUSTRY ADVANCEMENT PROGRAM SCHOLARSHIP FUND

NAME OF APPLICANT: _____

SCHOOL ACTIVITIES AND ACHIEVEMENTS:

1.	CLASS OFFICES: ex: president, vice president or other offices
	Freshman
	Sophomore
	Junior
	Senior

2.	HONOR SOCIETY, HONOR ROLLS (what years, ex: freshman etc....)

3.	MUSIC: ex: Band, Chorus, Orchestra..... (Number of years)

4.	CLUBS: 4H-Boy or Girl Scouts etc..... (Number of years)

INDUSTRY ADVANCEMENT PROGRAM SCHOLARSHIP FUND

5.	SCHOOL SERVICES OR COMMITTEES: ex: Teachers Aides, Office Aides, Dance Committees, etc.....

6.	AWARDS: President's, Service etc.....

7. SPORTS AND CHEERLEADER:

8. COMMUNITY ACTIVITIES AND ACHIEVEMENTS: ex. Community, church , civic etc.