



IUOE Local 150 Scholarship Fund, Inc. Award Program

Scholastic Information:

High school entry date: _____ Expected date of graduation: _____

Provide names, cities and states of high schools you have attended other than the one you are currently attending:

A) High School Name: _____

City: _____

State: _____

Years Attended: _____

B) High School Name: _____

City: _____

State: _____

Years Attended: _____

In what program do you expect to get your college degree?

1) College or School: _____ Applied: Yes No Accepted: Yes No

2) College or School: _____ Applied: Yes No Accepted: Yes No

3) College or School: _____ Applied: Yes No Accepted: Yes No

Specify class rank and send an official transcript from the high school or college you are presently attending.

High school seniors and college students: please provide transcript and GPA based on courses completed to date at time of application.

Transfer students: provide transcript from previously attended schools in addition to grades from present school.

Class Rank: _____ of _____ as of _____ Month _____ Year _____

Provide official SAT and/or ACT scores when available:

ACT:

SAT:



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Extracurricular Activities:

In what extracurricular activities have you participated while attending high school or while in college? Indicate elected offices held, if any. Specify purposes of local organizations.

1. Student activities by year: (List student government, Key Club, National Honor Society, etc.)

2. Community, volunteer, and/or social service activities by year: (Boy Scouts, Girl Scouts etc.)

3. Shooting sports, wildlife conservationism, outdoor interests, and activities: (Ducks Unlimited, Rocky Mountain Elk Foundation, trap or skeet shooting) *

4. Athletics by year:

5. Awards or honors:

* Preference for the “William ‘Bill’ E. Dugan” Designation is given to those with military status and/or shooting sports, wildlife conservationism, and outdoor interests and activities.



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Financial Information:

Father's occupation: _____ Annual income: \$ _____

Mother's occupation: _____ Annual income: \$ _____

Brothers and sisters in family older than you: _____ Younger than you: _____

Including yourself, how many members of your immediate family will be in college next year? _____

How many are receiving financial assistance in the form of scholarships or grants? _____

Do you have a Basic Educational Opportunity Grant (BEOG)? If yes, include the amount: _____

Complete the following estimate of college or school costs and revenues:

Tuition: \$ _____

Room & Board, Books, etc.: \$ _____

TOTAL: \$ _____

Financial Information:

	1st Year	2nd Year	3rd Year	4th Year
Parent Contribution:	\$ _____	\$ _____	\$ _____	\$ _____
Applicant's Earnings:	\$ _____	\$ _____	\$ _____	\$ _____
Loans:	\$ _____	\$ _____	\$ _____	\$ _____
Scholarships awarded to this date:	\$ _____	\$ _____	\$ _____	\$ _____

List any scholarships you have received, the amount, and for how many years they apply:



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Employment Information:

List below summer employment or other part-time work, briefly explaining duties and responsibilities. Begin with your most recent job. If part-time work, indicate the number of hours per week.

1. Company name and type of business: _____

Address: _____ Employed from: _____ to _____

Supervisor's name: _____ Supervisor's Phone: (_____) _____

Your duties: _____

Salary: \$ _____ per: MO WK HR

2. Company name and type of business: _____

Address: _____ Employed from: _____ to _____

Supervisor's name: _____ Supervisor's Phone: (_____) _____

Your duties: _____

Salary: \$ _____ per: MO WK HR

Military Status Information:

Please note you may need to submit proof of military service upon request (e.g. discharge paperwork)

Check here if you served as a combat veteran

Check here if you are a veteran

Check here if you have an IUOE, Local 150 Member legal guardian who served as a combat veteran and provide Member name and relationship *

Name _____ Relationship _____

Check here if you have an IUOE, Local 150 Member legal guardian who is a veteran and provide Member name and relationship *

Name _____ Relationship _____

Check here if you are participating in JROTC or plan to participate in ROTC

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I agree that the application and all attachments may be used for committee purpose of evaluation and possible selection by the Local 150 Operating Engineers Scholarship and/or its representatives. I also state that all information enclosed is true and correct to the best of my knowledge. We hereby authorize the financial aid office to release our family financial information and awards information to the Scholarship Committee. This information will be used to determine the student's need for a scholarship and will be kept strictly confidential.

Name of Prospective College(s) or School(s): _____

Address of School: _____
Number & Street City State Zip

Phone: (_____) _____ Fax: (_____) _____

Signed:

Student: _____ Date: _____

Parent: _____ Date: _____

Parent: _____ Date: _____

Note to Applicant:

You are responsible for ensuring that all items listed below are submitted online:

1. Completed 7-page application,
2. Two Personal Reference Forms,
3. Official high school and/or college transcript.

Submit all application materials to:

www.foodbank150.org

OR

IUOE Local 150 Scholarship Fund, Inc.
6170 Joliet Road, Suite 200, Countryside, IL 60525

Deadline for postmark and/or online submission for materials is the 3rd Tuesday in February preceding the start of the school year.