



# Annual Local 150 Operating Engineers Scholarship Award Program

**DEADLINE:**

Each entry, including all required data must be submitted online by the 3rd Tuesday in February preceding the start of the school year. All entries are to be sent to:

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

**RULES:**

Rules for Completing the Annual Local 150 Operating Engineers Scholarship Application:

1. Complete ALL sections of this application.
2. Type or print using black ink.
3. Use "N/A" if question does not apply.
4. Appearance and completeness WILL BE CONSIDERED during evaluation
5. All sections must be completed in order for application to be considered.
6. The application must be postmarked or submitted online no later than the 3rd Tuesday in February preceding the start of the school year.

**Personal:**

Name: \_\_\_\_\_  
First Middle Last

Home Address: \_\_\_\_\_  
Number & Street City State Zip

Name of High School or College Currently Attending: \_\_\_\_\_

Address of School: \_\_\_\_\_  
Number & Street City State Zip

Home Telephone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Present Age: \_\_\_\_\_

Email Address: \_\_\_\_\_

Parent or legal guardian's name: \_\_\_\_\_

Relationship to IUOE, Local 150 Member \_\_\_\_\_ Member Registration No. \_\_\_\_\_  
This question must be answered or application will be considered void Must be current on dues

**Scholarship Information:**

Check the box for the Scholarship you are applying for (check only applicable scholarships):

- 2 Year Mechanic Scholarship:
- 2 Year Degree Scholarship:
- 4 Year Degree Scholarship:
- 1 Year Work Boot Scholarship



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## 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 \_\_\_\_\_

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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: \$ \_\_\_\_\_

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## 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

\* 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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## **Additional Information:**

Answer the following questions using only the space provided. Any additional sheets will not be considered.

1. What difference would winning this scholarship make in your life?

2. Summarize your long-term career objectives:

3. What do you perceive as your one strongest attribute? Why?



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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 and/or postmarked by the 3rd Tuesday in February preceding the start of the school year.

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

**Submit all application materials to:**  
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.**