



IUOE Local 150 Scholarship Fund, Inc. Award Program

2023-2024

Scholastic Information:

High school entry date (Month/Year): _____ Expected date of graduation (Month/Year): _____

Provide names, cities, and states of high schools you have attended other than the one you are currently attending (please mark N/A if not applicable):

A) High School Name: _____

City: _____

State: _____

Years Attended: _____

B) High School Name: _____

City: _____

State: _____

Years Attended: _____

Do you know which accredited college or university you will be attending?

Yes No

If yes, what is the name of the college or university?

Name of School: _____ City and State of School _____

If possible, please specify you class rank and send us an unofficial transcript from the high school or college you are currently attending.

A) High school and college students: Please provide an unofficial transcript and GPA based on courses completed to date at the time of submitting this application.

B) Transfer students: Please provide an unofficial transcript from previously attended schools in addition to grades from present school.

Class Rank: _____ of _____ as of _____
Your Rank Total Students Month/Date/Year



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Extracurricular Activities Information:

In what extracurricular activities have you participated in- and out-of-school while attending high school or while in college? Please indicate any leadership roles or elected offices held, if applicable.

1. In-school student activities by year: (Examples: student government, Key Club, National Honor Society, etc.)

2. Out-of-school community, volunteer, and/or social service activities by year: (Examples: Boy Scouts, Girl Scouts, food pantry volunteering, etc.)

3. In-school or out-of-school activities, interestes, or programs by year: (Examples: Ducks Unlimited, AmeriCorps, Music, etc.)

4. Athletics by year:

5. Awards or honors by year:



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Financial Information:

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

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

How many siblings do you have older than you? _____ How many younger than you? _____

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

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

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

Please estimate the annual cost of the college/school you plan to attend:

Tuition: \$ _____

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

Total: \$ _____

Military Status Information:

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

- Check here if you are currently serving in the military
- Check here if you are participating in JROTC or plan to participate in ROTC
- Check here if you are a veteran
- Check here if you have an IUOE, Local 150 member parent/legal guardian who is currently serving and/or has served in the military. If yes, please provide the IUOE, Local 150 member's name and your relationship to them:

Name _____ Relationship _____



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Employment Information:

Please list below any summer employment or other part-time work you have done. Include a brief explanation of duties and responsibilities in the position. Begin with your most recent job. If part-time work, indicate the number of hours worked per week.

1. Company Name and Type of Business: _____

Address: _____ Employed from: _____ to _____

Supervisor's Name: _____

Your Duties: _____

Salary: \$ _____ per: Month Hour

2. Company Name and Type of Business: _____

Address: _____ Employed from: _____ to _____

Supervisor's Name: _____

Your Duties: _____

Salary: \$ _____ per: Month Hour



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Agreement and Signature:

I agree that the application and all attachments may be used for committee purpose of evaluation and possible selection by the IUOE, Local 150 Scholarship Fund, Inc. and/or its representatives. I also state that all information enclosed is true and correct to the best of my knowledge. I hereby authorize the financial aid office to release my family's financial information and awards information to the Scholarship Committee. This information will be used to determine the applicant'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 of School: (_____) _____ Fax of School: (_____) _____

Signed:

Applicant: _____ Date: _____

Note to Applicant:

You are responsible for ensuring that all items listed below are submitted to the Scholarship Committee:

1. Completed 7-page application (this document),
2. Two Personal Reference Forms,
3. Unofficial high school and/or college transcript.

Submit all application materials online at:

www.foodbank150.org/submit-application

Or send physical copies 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 (February 21, 2023).