DEADLINE:

All required documents must be submitted online or postmarked by the 3rd Tuesday in February preceding the start of the school year (Tuesday, February 20, 2024). The required documents include the application (this document), two personal reference forms, and an unofficial transcript from all high school and/or college studies. All entries can be uploaded electronically at:

www.foodbank150.org/submit-application

Or physical copies can be sent to:

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

RULES:

Rules for completing the annual IUOE Local 150 Scholarship Fund, Inc. application:

- 1. All sections of this application must be completed in order for application to be considered.
- 2. Please type or print using black ink.
- 3. Use "N/A" if question does not apply.
- Appearance and completeness will be considered during evaluation.
- 5. The application must be postmarked or submitted online no later than the 3rd Tuesday in February preceding the start of the school year (Tuesday, February 20, 2024).

Personal Information:				
Name:				
First Home Address:	Middle		Last	
Number & Street Name of High School or College Currently Attendin		ty State	Zip	
Address of School:Number & Street				
			•	
Home Telephone:	Date of Birth:	Present Age:		
Email Address:				
•	estion must be answered or application will be considered vo	oid	Must be current on dues	
Scholarship Information:				
Check the box for the Scholarship you are applying to 2-Year Mechanic Scholarship:	for (check only applicable scholarships):	:		
2- Year Mechanic Scholarship.				
2-Year Degree Scholarship:				
4-Year Degree Scholarship:				
1-Year Work Boot Scholarship				

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:	
State:	
Years Attended:	
B) High School Name:	
City:	
State:	
Years Attended:	
Do you know which accredited college or university you will be attending	ng?
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 transc	ript from the high school or college you are currently attending.
A) High school and college students: Please provide an unoffic submitting this application.	ial transcript and GPA based on courses completed to date at the time of
B) Transfer students: Please provide an unofficial transcript fro	m previously attended schools in addition to grades from present school.
Class Rank: of Total Students as of	ofMonth/Date/Year

Extracurricular Activities Information:

Financial Informatio	n:	
Father's occupation:		Annual income: \$
Mother's occupation:		Annual income: \$
How many siblings do you have o	older than you?	How many younger than you?
Including yourself, how many me	embers of your immediate	amily will be in college next year?
How many of your family member	ers are receiving financial a	ssistance in the form of scholarships or grants?
Do you have a Basic Educational	Opportunity Grant (BEOC	?)? 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 Infor		
Please note you may need to subn	nit proof of any military se	vice upon request (e.g. discharge paperwork).
Check here if you are current	ly serving in the military	
Check here if you are particip	pating in JROTC or plan to	particiate in ROTC
Check here if you are a veter	an	
Check here if you have an IU provide the IUOE, Local 150		rent/legal guardian who is currently serving and/or has served in the military. If yes, please relationship to them:
Name		Relationship

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: \$			
2. Company Name and Type of Business: _			
Address:		Employed from:	to
Supervisor's Name:			
Your Duties:			
Salary: \$	per: Month Hour		

Additional Information:

Please answer the following sl	hort essay questions.
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1. How has the Operators' Local Union 150 impacted your life?

2. What are your long-term career goals and why do you want to pursue this area of study/field? How will this scholarship help help you achieve your goals?

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. foodbank 150. 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 20, 2024).