



**COMMUNICATIONS WORKERS OF AMERICA
LOCAL 1014**

**330 Market St. 2nd Floor, Camden, NJ 08102
Phone (856) 541-4191 / Fax (856) 541-9390 / Email office@cwalocal1014.org**

December 2018

RE: Eligibility Qualifications for CWA Local 1014/Henry J. Dunn Scholarships

Dear High School Seniors and Parents:

I am pleased to provide you with the following information regarding the CWA Local 1014/Henry J. Dunn Scholarship Program. The scholarship is a one-time award. **It is paid directly to the college or trade school attended by the recipient, after the student successfully earns 12 credits during his/her first and/or second semester or one year of trade school and submits an official college transcript or equivalent documentation to the CWA Local 1014 office.** The number and amount of the scholarships will be determined by the Scholarship Committee prior to the selections.

Qualifications:

1. The student must be a child of a CWA Local 1014 member in good standing (current with full dues payments).
2. The student must have demonstrated a conscientious effort in his or her studies **and be certified** as being prepared for college/university or trade school course work by his or her high school guidance office.
3. The student must be a **high school senior graduating in Spring '19** and of good moral character.

Students meeting the qualifications described above and wishing to apply for a scholarship must complete the program application. Application packets are available through the student's high school guidance office or through the CWA Local 1014 office and on-line at www.cwalocal1014.org. The packets include the application, a CWA Local 1014 membership confirmation form (to be completed by the parent), and a certification of preparedness for college or trade school form (to be completed by the high school guidance office). The application, membership confirmation form, certification of preparedness and a copy of student's high school transcript must be submitted to the CWA Local 1014 office by the end of business on **Friday, March 1, 2019**. We prefer that the applications be submitted directly by the high school guidance office, but will accept complete applications submitted by students.

All eligible applications will be made part of a random drawing at the March 26, 2019 CWA Local 1014 General Membership Meeting. You can be assured that each eligible application will be given an equal opportunity for selection.

If you have any questions regarding the scholarship program, please contact the CWA Local 1014 office at (856) 541-4191.

Sincerely,

A handwritten signature in black ink, appearing to read 'Karl Walko', with a stylized flourish at the end.

Karl R. Walko
CWA Local 1014 President

KRW/ct

Attachments



**CWA LOCAL 1014
SCHOLARSHIP APPLICATION**

DIRECTIONS: Students applying for this scholarship must complete this application along with supplying a copy of the student's high school transcript and return it to CWA Local 1014's office on or before **Friday, March 1, 2019.**

NAME OF APPLICANT: _____
(First) (Middle) (Last)

MAILING ADDRESS: _____
(Number/Street)

(City) (State) (Zip)

HOME PHONE: _____ BIRTHDATE: _____

CAREER GOALS: _____

PROPOSED FIELD(S) OF STUDY AT COLLEGE OR TRADE SCHOOL: _____

IN ORDER FOR THIS APPLICATION TO BE COMPLETE, THE FOLLOWING ITEMS MUST BE ATTACHED TO THIS APPLICATION: 1) PARENT'S MEMBERSHIP CONFIRMATION FORM; 2) CERTIFICATION OF PREPAREDNESS FOR COLLEGE OR TRADE SCHOOL BY HIGH SCHOOL GUIDANCE OFFICE; 3) COPY OF STUDENT'S HIGH SCHOOL TRANSCRIPT.

LIST THE COLLEGES OR TRADE SCHOOLS TO WHICH YOU HAVE APPLIED FOR ADMISSION,
PRIORITIZE YOUR CHOICES:

1ST CHOICE: _____

2ND CHOICE: _____

3RD CHOICE: _____

HAVE YOU BEEN ACCEPTED AT ONE OR MORE COLLEGES OR TRADE SCHOOLS?

YES _____ NO _____ IF YES, PLEASE FILL-IN BELOW.

1. NAME OF INSTITUTION _____

2. NAME OF INSTITUTION _____

3. NAME OF INSTITUTION _____

ARE YOU CURRENTLY EMPLOYED EITHER ON A FULL-TIME OR PART TIME BASIS?

YES _____ NO _____

IF YES, STATE NAME AND ADDRESS OF YOUR EMPLOYER.

LIST NAMES AND ADDRESSES OF TWO REFERENCES OTHER THAN FAMILY.

1. NAME: _____ 2. NAME: _____

ADDRESS: _____ ADDRESS: _____

LIST ANY CIVIC, SERVICE, COMMUNITY OR SCHOOL ACTIVITIES IN WHICH YOU ARE NOW OR
HAVE BEEN INVOLVED. _____

LIST ANY AWARDS, HONORS OR SPECIAL RECOGNITION YOU HAVE RECEIVED (BOTH SCHOLASTIC
AND OTHER): _____

LIST YOUR HOBBIES AND MAJOR INTERESTS: _____

STATE IN YOUR OWN WORDS THE REASON WHY YOU BELIEVE YOU SHOULD BE AWARDED A CWA LOCAL 1014 SCHOLARSHIP:

I CERTIFY THAT, TO THE BEST OF MY KNOWLEDGE, ALL THE INFORMATION IN THIS APPLICATION IS ACCURATE AND TRUE.

STUDENT'S SIGNATURE: _____ DATE: _____

PARENT/GUARDIAN NAME (PRINT): _____

SIGNATURE: _____ DATE: _____
(CWA LOCAL 1014 MEMBER)



Dear Scholarship Applicant:

Please have your parent or guardian complete this form and return it to the CWA Local 1014 office prior to the application deadline (Friday, March 1, 2019).

MEMBERSHIP CONFIRMATION FORM

(Please type or print)

MEMBER NAME: _____

HOME ADDRESS: _____

TOWN: _____ STATE: _____ ZIP: _____

BARGAINING UNIT: (Please specify department)

BARGAINING UNIT: _____

DEPARTMENT: _____

LAST 4 DIGITS OF SS#: _____ DATE OF HIRE: _____

WORK PHONE: _____ HOME PHONE: _____

SIGNATURE: _____

NOTE: THE PARENT/MEMBER MUST BE CURRENT WITH UNION DUES.



Dear Scholarship Applicant:

Please have your high school guidance office complete and sign this form and return it to the CWA Local 1014 office prior to the application deadline (Friday, March 1, 2019). Also, please attach a copy of student's high school transcript.

CERTIFICATION OF PREPAREDNESS FOR COLLEGE OR TRADE SCHOOL FORM

(Please type or print)

HIGH SCHOOL REP. NAME: _____

TITLE: _____

TELEPHONE #: _____

EMAIL ADDRESS: _____

NAME OF HIGH SCHOOL: _____

TOWN: _____ STATE: _____ ZIP: _____

I hereby certify that _____ will be prepared for college/university or trade school course work following his/her graduation at the end of this scholastic year.

SIGNATURE OF HIGH SCHOOL REPRESENTATIVE: _____

DATE: _____