



TEAMSTERS LOCAL #331 SCHOLARSHIP PROGRAM

1 Philadelphia Avenue
Egg Harbor City, NJ 08215

SCHOLARSHIP APPLICATION

Student's Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Email Address _____

Relationship to Member: Son _____ Daughter _____

Date of Birth _____ Student's Social Security Number _____

Name of High School _____

Address of High School _____

Principal or Headmaster _____

I (have taken) (will take) the Scholastic Aptitude Test (S.A.T.) on MONTH _____ YEAR _____

I AUTHORIZE THE USE OF MY S.A.T. SCORES FOR THIS APPLICATION.

STUDENT'S SIGNATURE

DATE SIGNED

Member's Name _____ Member's SS# Number _____

Address if different from Son/Daughter _____

Name of Present or Last Employer _____

MEMBER'S SIGNATURE

DATE SIGNED

Biographical Data Sheet -- To be completed by Student

The questions that follow are designed to collect information about your background, your interests and your plans. Your answers to these questions will be used only in connection with your application for the Teamsters Local 331 Health & Welfare Fund Scholarship Program.

The selection of scholarship recipients will be influenced by the completeness of replies and the neatness of presentation. If possible, please type or print your replies.

1.) Name of applicant in full _____ M ___ F ___

2.) Permanent home address _____

City _____ State _____ Zip _____

3.) Telephone _____ Area Code _____ Number _____ Citizenship U.S. _____
Yes or No

4.) Age _____ 5.) Date of Birth _____ Height _____ Weight _____
Month/Day/Year

6.) Father's Full Name _____ If deceased give year of death _____

Home address if different from yours _____

What is your father's occupation? (Be specific as to what his position is and what he does. If deceased, state what his occupation was) _____

7.) Mother's Full Name _____ If deceased give year of death _____

Home address if different from yours _____

What is your mother's occupation? (Be specific as to what her position is and what she does. If deceased, state what her occupation was.) _____

8.) Brothers: Number _____ Ages _____ (9) Sisters: Number _____ Ages _____

10.) Name of parent or guardian who supports you _____

11.) If someone other than your father or mother supports you, give the following information:

Name _____

Address

_____ Street and Number _____ City _____ State _____ Zip Code _____

Relationship to you _____ Occupation _____

12.) List in chronological order all schools attended in the last four years, including any summer or special courses.

Name	Location City and State	Dates of Attendance

13.) List any academic distinctions or honors you have won and the grade you were in when awarded (9th, 10th, 11th, or 12th) _____

14.) What course of study (major) would you like to follow in college? (You may indicate more than one or answer "undecided".) _____

15.) Do you plan to go to graduate or professional school after college? _____

16.) Have you made any decision as to your future occupation? Yes _____ No _____

If yes, specify _____

17.) Note those activities in which you have been actively engaged and which you feel have been most meaningful to you. (Include years of participation, grade levels, and any offices held.)

Publications _____ Student Government _____

Debating and Dramatics _____ Community Service _____

Music _____ Church Activities _____

Art _____ Athletics _____

Scouts, clubs, etc. _____

18.) List jobs (including summer employment) you have held in the past three or four years.

Employment / Describe Responsibilities	Summer	School Year	Date of Employment	Number of Hours per Week

19.) What books and articles other than school assignments have you read recently?

Which of these have you found most stimulating and why?

20.) Applicants are required to provide a minimal of 300 words (500 max) for each topic on a separate page?

- a. Education – Provide your thoughts on how education has impacted you and suggestions for improving the educational system to improve student learning.
- b. Society – Provide your thoughts on a major issue impacting our society and suggestions to help improve this problem.
- c. The Labor Movement – Describe your thoughts on the role of Unions and the role of the membership. Identify a major issue facing Unions and your suggestions to improve the problem.
- d. Describe how your parent is actively engaged as a Teamster member:
 - 1. Regularly attends monthly meetings
 - 2. Attends Teamsters workshops
 - 3. Attends Teamsters annual events
 - 4. Attends Shop Steward and/or committee meetings
 - 5. Other (be specific)

Applicants are required to interview the Teamster parent and provide a brief description of their job responsibilities.

Please look over this form to make sure you have answered all questions completely.

Date

Applicant's Signature

**Upon completion, return application to:
TEAMSTERS LOCAL 331
BENEFITS FUNDS OFFICE
1 PHILADELPHIA AVENUE
EGG HARBOR CITY, NJ 08215**



TO BE COMPLETED BY FUNDS OFFICE:

THIS IS TO CERTIFY THAT THE APPLICANT IS ELIGIBLE FOR SCHOLARSHIP BENEFITS ACCORDING TO THE TEAMSTERS UNION #331 BENEFITS RECORDS.

SIGNATURE _____ TITLE _____ DATE SIGNED _____

TEAMSTERS LOCAL #331 BENEFITS SCHOLARSHIP FUND



**TEAMSTERS LOCAL #331 BENEFITS
SCHOLARSHIP APPLICATION
SECONDARY SCHOOL REPORT
FORM**

Student's Name _____

School _____

Principal _____

Date of Graduation _____

**NOTE: Please present this form to your Principal or Guidance
Counselor. Completed form is due on or before February 15th to:**

**Teamsters Local 331 Benefits
Trustees**

Union
Marcus King
Abimael Ortiz

Employer
Luis Fonseca
Thomas Ritter

**1 Philadelphia Avenue
Egg Harbor City, NJ 08215**

(609) 485-0837

FAX (609) 641-2740

SECONDARY SCHOOL REPORT FORM

PLEASE PRINT:

Name of Student _____
Last First Middle

School _____
Name City State

Instructions to Principal:

The above-named student is an applicant for a scholarship. To process his/her application, we need the following: a carefully considered character and ability estimate by a teacher who knows the student well, a summary of teachers' judgements of the student, and a record of his secondary school academic performance. This information will be used only in connection with the selection of scholarship recipients.

This report form should be signed by the evaluator on page two and endorsed by the principal on page four. Complete information should be given wherever possible, and answers limited to the spaces provided. Please return this form as promptly as possible.

PLEASE PRINT

Name of principal _____
Last First Middle

Are you confident that the student will receive his school diploma during the current academic year?

_____ Yes _____ No If no, please explain _____

Who is evaluating the student on page 2?

Name _____ Relationship of student _____

Length of relationship _____ If teacher, please state subject _____

Considering this student's interests, work habits, and life goals, what is your estimate of the chances that he will be motivated to take advantage of the opportunities available to him in college? Please give reasons for your estimate.

Are there any unusual conditions, which you think, might favorably or unfavorably affect the student's adjustment and performance in college?

Has this student given any strong evidence of leadership ability? _____ Yes _____ No

Has the student shown exceptional talent or originality in any specific field such as art, music, science, literature, mathematics, or industrial arts? _____ Yes _____ No
Please cite examples.

What is the student's principal weakness?

What is the student's principal strength?

Sometimes special circumstances should be considered when evaluating a student's achievement record and test scores. If, in your opinion, this student may have been handicapped by any such circumstances, please specify.

Date

Signature

Title

COMMENTS BY TEACHERS:

Is this student now a senior in high school? _____ Yes _____ No

Exact Junior/Senior Year Rank in Class or Percentile Standing _____

Entire Junior/Senior Class Size _____

PLEASE ATTACH A COPY OF THE SECONDARY SCHOOL CLASS
RECORD/TRANSCRIPT THAT REFLECTS GRADES, ACTIVITIES, AWARDS, HONORS,
AND CLASS RANK, ETC.

Date Signed

Principal or Guidance Counselor's Signature

WHEN COMPLETED, PLEASE RETURN TO:

TEAMSTERS LOCAL 331 BENEFITS
1 PHILADELPHIA AVE.
EGG HARBOR CITY, NJ 08215

Deadline February 15th.