

1620 Electrical Workers SCHOLARSHIP APPLICATION FORM

(Page 1 of 2)



Please indicate for which scholarship you are applying:

(To be completed by Applicant)

CONSTRUCTION

UTILITY

Full Name		Telephone #
Permanent Address	Postal Code	Date of Birth
Place of Birth		
Proposed Field of Study	Commencement of Program	Undergraduate Degree <input type="checkbox"/>
		Certificate <input type="checkbox"/>
		Diploma <input type="checkbox"/>
List Post-Secondary Schools/ Universities where you have registered		
<hr/> <hr/>		
Outline briefly your plans for your future career or profession:		

(To be completed by Local 1620 Member)		
Name of Parent or Legally Appointed Guardian		IBEW Card #
Address, if different than above	Postal Code	Telephone #
Last Month & Year Dues Paid by Member		Relationship to Applicant

(To be completed by applicant)

On a separate sheet of paper, please answer the following question in 100 words or less:

“WHAT DOES THIS SCHOLARSHIP MEAN TO ME?”

**Below, please list all extracurricular activities, interests, special skills and community involvement.
(THIS IS IMPORTANT)**

REFERENCES: List three people, two of whom must be teachers, who you are asking to complete and return the Letter of Reference form directly to 1620 Electrical Workers.

Name

Occupation

Address

Telephone #

Name

Occupation

Address

Telephone #

Name

Occupation

Address

Telephone #

Name of High School you are attending

Telephone #