

# National Postal Mail Handlers Union-Local 305

4907 Fitzhugh Avenue, Suite 100 Richmond, VA 23230-3533

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### NPMHU LOCAL 305 SCHOLARSHIP PROGRAM FOR 2019 SCHOOL YEAR

The National Postal Mail Handler Union Local 305 is pleased to offer the opportunity for Dependents of regular craft members to apply for scholarship assistance from the NPMHU LOCAL 305 Scholarship Program. Specific eligibility requirements for the program are detailed below.

This scholarship has been providing assistance to deserving recipients since 1988.

#### SCHOLARSHIP ELIGIBILITY AND APPLICATION INSTRUCTIONS

The purpose of the National Postal Mail Handlers Union Local 305 Scholarship Program is to provide educational opportunities for Eligibility Dependents of Union Members by providing financial assistance to those who meet the conditions of eligibility and who are selected pursuant to Article III.C. of Local 305's Voluntary Employee Benefit Association trust fund.

### **ELIGIBILITY**

- 1. Article III, Section: Benefit Eligibility-To qualify as a participant in this Plan a person must be an Eligible Dependent of a Member, must have received a high school degree or is equivalent within the preceding four years, and must be entering a public or private institution of higher learning for the first time in the Plan Year for which he/she applies for Scholarship Plan Benefits.
- 2. Members must be current in the payment of his/her Union dues for two years immediately prior to March 1, 2019.
- 3. Applicants must follow and complete the Application Procedure set forth below.

4. To ensure that their college or other post-secondary institution receives the Scholarship funds awarded, each successful applicant will be required to provide the Scholarship Committee with written verification that he/she has been accepted by an accredited institution of higher learning, including a two-or four-year college, vocational institution, trade or technical school, or other institute of higher learning. (Students pursuing graduate degrees are not eligible to receive a scholarship). This written verification is not needed until after a scholarship is awarded.

### <u>APPLICATION PROCEDURE</u>

Applicants must submit complete applications and the related materials listed below to the Scholarship Committee on or before April 17, 2019, by the Close of Day at 5:00 pm to 4907 Fitzhugh Avenue, Suite 100, Richmond VA 23230. The application will not be considered complete, and will not be reviewed, until all the information has been received. If application is not complete, by the deadline, the applicant will not be included in the application pool. All materials should be sent to: Scholarship Committee, National Postal Mail Handlers Union Local 305, 4907 Fitzhugh Avenue, Suite 100, Richmond, VA 23230.

### ADDITIONAL SCHOLARSHIP APPLICATION INFORMATION

When submitting your completed application, please include your written essay and completed application form, two letters of reference, proof of dependency, and high school transcripts. Applications must include all of the above listed items by the deadline in order to be considered by the scholarship committee. Information on the status of an application cannot be provided at any time during the consideration process. All applicants will be notified when the scholarship winners are announced between May 13-24, 2019.

### <u>CALENDAR</u>

♦ Scholarship Application period March 1, 2019-April 17, 2019

♦ Scholarship Application deadline April 17, 2019 (received by COB; 5:00 PM)

♦ Scholarship judging period April 18, 2019-May 13, 2019

♦ Scholarship notification period May 13, 2019-May 24, 2019

#### **CHECKLIST**

- ⇒ Complete scholarship application
- ⇒ Complete Essay (Written essay of no more than 500 words describing the applicant's life experiences, extracurricular activities, work history and aspirations.
- ⇒ Completed letters of reference
- ⇒ 2018 signed tax form or other current proof of dependency.
- ⇒ Review and Sign application.
- ⇒ Official high school transcript (including standardize test scores)

## **BIOLOGICAL QUESTIONNAIRE**

(LAST)		(FIRST)				(MIDDLE)	
DDRESS:							
(STR	EET)	(APT.)		(CITY)		(STATE)	(ZIP)
PPLICANT'S P	PPLICANT'S PHONE:		CELL PHONE:		<b>:</b>		
IRTH DATE: _		APPLICANT'S SOCIAL SEC # (last 4):					
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OCAL 305 MEN	MBER EMPLOYME	<b>NT IDENTIFIC</b> A	1 <i>TION</i> #:				
OSTAL FACILI	TY WHERE MEMB	EER WORKS: FA	ACILITY I	NAME:			
HAT'S THE RI	ELATIONSHIP TO	THE LOCAL 305	<i>MEMBE</i>	CR (CIRC	CLE ONE):		
	UGHTER OTHER						
	ools, Colleges, and U						
Schools	Name of Institution	Location		tes of idance	Degree Aw	arded	Date Degree Awarded or expected
Secondary or High School							
College or Universities							
lease list your m	ost recent full-time o	r part-time emplo	yment an	d/or mili	tary services,	or internsl	hip, if any.
From	To	Name and			for leaving	Hours we	

List any schools honors you and any school clubs, sport in, and would like the Schopages to document these value.	ts, volunteo olarship Co	er work, or other extro ommittee to consider (	acurricular school activitie applicants are encouraged	s that you participated to attach additional		
Name of High School Prin	cipal:		Phone:			
Name of Guidance Counselor:			Phone:			
I certify that the statements Scholarship are complete a there is any change in any incomplete information wil	nd accura of the fact	te. I will promptly inf is indicated herein. I t	form the Scholarship Comi understand that providing j	nittee in writing, if false, misleading or		
Signature of Applicant			Date			
Parent or Guardian (Memb the application period of M legal document verifying th received by April 17, 2019,	larch 1, 20 nat the stud	119. Enclosed a copy of dent for which you are	of your 2018 signed tax for a applying is currently your	m or any other current		
Parent/Guardian Name: _						
ì	Last	First	M.I	EIN		