

Local 13-2001

NOBP

281-427-1024

email: usw13-2001@comcast.net

website: www.uswlocal13-2001.com

Facebook: USW Local 13-2001

Dear Applicant:

Ricky Brooks
President

Michael Loy
Process VP

Courtney Wolter
Mechanical VP

Brenda Johnson
Lab VP

Ashley Coker
Chemical Plant VP

Aleshia Hill
Secretary

Steven Doran
Treasurer

Johnathan Terrell
Health & Safety

Pamela Ayala
Office Manager

311 S. Hwy 146
Baytown,
Texas 77520

Fax:
281-427-0629

This application and **ALL** required documentation listed below **MUST** be returned to USW Local 13-2001 at 311 S. Highway 146, Baytown by: **Friday, April 12, 2024 before 4:00 p.m.**

OTHER INFORMATION REQUIRED TO COMPLETE THIS APPLICATION: **(ALL of this information must be included in order for the application to be reviewed.)**

1. **Personal narrative from applicant**, introducing candidate, elaborating on relevant background and explaining why the scholarship is deserved. Narrative should be one typed, double spaced, 8½ x 11 sheet. Applicant's name, address and name of high school and/or college should be in the upper right-hand corner of the page. The applicant should list any special condition that should be considered. **Please make sure that you submit a current narrative.**
2. **Official transcript of high school**, indicating SAT and/or ACT scores, certified rank in class, academic average and grade scale. Honors courses should be indicated. **College students submit official transcript from college.**
3. **Copy of letter of acceptance from college**, university or trade school which applicant will attend if acceptance has been confirmed.
4. **Turning in your application.** Once you have turned in your application, it is your responsibility to call Pamela at the Union Hall to go over it. **INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.**

Please read over this application before filling it out and if you have any questions, please call Pamela at the Union Hall at 281-427-1024. **Also note that students that are already attending college do not need to fill out page 2 and must be enrolled full time.**

APPLICATIONS BECOME THE PROPERTY OF USW LOCAL 13-2001 AND WILL NOT BE RETURNED.

2024 USW SCHOLARSHIP APPLICATION

(Please print clearly or type all information)

****APPLICATION MUST BE RETURNED BY APRIL 12, 2024****

Date: _____

I. FAMILY HISTORY:

Name of Applicant: _____

Street Address: _____

City: _____ Zip: _____ Phone: _____

Social Security #: _____ Date of Birth: _____

Father's Name: _____ Occupation: _____
Resides with Applicant: ---yes ---no (circle one)

Mother's Name: _____ Occupation: _____
Resides with Applicant: ---yes ---no (circle one)

Number and ages of Brothers: _____

Number and ages of Sisters: _____

Number of Siblings in College now: _____

IIA. ACADEMIC INFORMATION FOR HIGH SCHOOL SENIORS:

****This section to be complete only by graduating high school seniors.****

Name of High School: _____ School District: _____

Address: _____ City/State/Zip: _____

Senior Counselor's Name: _____ Phone: _____

Date of Anticipated graduation: _____ Number in Graduating class: _____

Your rank: _____

GPA for four (4) years: _____ out of _____. (Example 3.6 of 4.0 or 4.1 of 5.0)

Were you in honors or advanced classes? _____ If answer is yes, please list these courses in the space provided:

What is your SAT score? _____ ACT score? _____

What is your planned major in college/trade school? _____

What is your planned career? _____

HIGH SCHOOL HONORS AND AWARDS:

In the space below, list any offices held or awards received in high school. If a repetitive award or recognition, please indicate years recognition was achieved. For example, National Honor Society, grades 9, 10, 11, 12.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____

IIB. ACADEMIC INFORMATION FOR COLLEGE STUDENTS:

****This section to be complete by college students only.***

Name of College: _____

Student ID# _____

Address: _____ City/State/Zip: _____

Phone: _____ Date of Anticipated graduation: _____

Were you in honors or advanced classes? _____ If answer is yes, please list these courses in the space provided

What is your planned major in college/trade school? _____

What is you planned career? _____

COLLEGE HONORS AND AWARDS:

In the space below, list any offices held or awards received in college. If a repetitive award or recognition, please indicate years recognition was achieved. For example; Deans List, Honor Society, Officer in Fraternity of Sorority

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____

III. EXTRACURRICULAR ACTIVITIES

In the space below, please outline other clubs or activities in which you have participated, indicating any other awards, recognition or offices held in conjunction with them. For example; Interscholastic League competition, Debate, Drama Club, Orchestra, Science Fairs, Athletics

IV. COMMUNITY ACTIVITIES

In the spaces below, please outline any other activities in which you participate, indicating any special recognition you might have received. For example; church/synagogue activities or community service projects.

V. Have you applied for admission to a college, university, or trade school? _____

Have you been accepted? _____ List name (s) of institutions where you have been accepted _____

Were there any conditions to your acceptance? _____ If answer is yes please explain

Name of College/University/Trade School: _____

Address: _____ City/State/Zip: _____

Tuition per semester hour: _____ Fees per semester: _____

Student ID# if assigned: _____

Housing per semester: _____ Live in Dormitory? _____

Food per semester: _____ Recreation/Travel: _____

List any other anticipated miscellaneous expenses: _____

List jobs held in the last 12 months:

Are you applying for other scholarships or loans?: _____ If answer is yes, please list names and amounts and indicate if you have received confirmation of any other financial assistance.

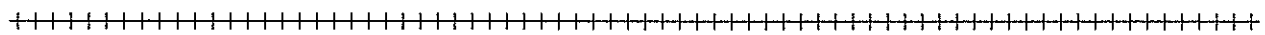
VI. PERSONAL REFERENCES

Please list the names and addresses of three (3) individuals as personal references, other than your high school principal, guidance counselor or relatives.

1. _____

2. _____

3. _____



I hereby certify that the statements contained in this application are true, accurate and complete.

Signature of Applicant

Date

We hereby certify that we have examined this application and its relevant documentation and find it is true, accurate and complete.

Signature of Principal/Counselor

Date