

LOCAL 770/DHA SCHOLARSHIP APPLICATION REQUEST

Please mail to: UFCW LOCAL 770, 630 Shatto Place, Los Angeles, CA 90005— c/o Executive Office

Applicant's Full Name

Last Four Digits of Applicant's Social Security #

School Attending in Fall

Cell and Home Phone Numbers

Email Address

Applicant's Mailing Address

Applicant's City, State and Zip

Relationship to Member

Member Full Name

Last Four Digits of Member's Social Security #

Member Employer

I am a member/dependent of UFCW Local 770 in good standing. In order to be eligible for the Local 770/DHA scholarship, I will remain in good standing from September 2016 through September 2017, and in the Fall will be enrolled as a full-time student (Undergraduate: 12 units or more; Graduate: 6 units or more), in a degree program at any accredited college or university.

Signed by Applicant in Acceptance of the Terms