

SOUTH CENTRAL FEDERATION OF LABOR, AFL-CIO 2018 SCHOLARSHIP APPLICATION

Application Information

Name		Phone #
Street Address, City, State, Zip Code		County
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Email Address	regio sinttenta la sel-	the Arthur open design of the Child State of the Ch
		entering dispendent music
Name of High School		Month & Year of H.S. Graduation
Name of College or University		Major (if determined)
-overvale (c)		n Member Information age if more than one union member)
Union Member's Name		Relationship to Member (Mother, Father, Guardian, Applicant)
		manufacture to the state of the
Member's Local Union Name		Local Union #
Name & Address of Wor	k Location	PEROMENTAL SENDENG HOW SOME HOUSE PROPERTY OF THE PROPERTY OF
The Control of the Co		the Particular and the Company of th
Application must be rece Labor, AFL-CIO, 1602 S. P will be posted on <u>www.SC</u>	ark Street, #228, Ma	by Friday, June 29, 2018 at the South Central Federation of dison, WI 53715-2108 or by email to Sharon@scfl.org. Results 018.
Please sign the following	g statement:	
selection of scholarship w successful applicant for th South Central Federation	rinners is final and bi ne scholarship grant, of Labor for such sch ration of evidence of	ecision of the South Central Federation of Labor, AFL-CIO, in the inding. I also agree that, in the event I am selected as a I shall comply with all rules and regulations set down by the nolarship. I understand that receipt of this scholarship is payment of tuition each semester. Incomplete and duplicate
Applicant's Signature		Date