

# SCHOLARSHIP APPLICATION FORM

Please indicate for which scholarship you are applying

CONSTRUCTION

UTILITY

**(PLEASE SEE REVERSE)**

Name (*Surname First*)

SIN #

Permanent Address

Postal Code

Telephone #

Place of Birth

Date of Birth

Proposed Field of Study

Commencement of Program

Undergraduate Degree

Certificate

Diploma

List Post Secondary Schools/Universities where you have registered

\_\_\_\_\_

\_\_\_\_\_

Outline briefly your plans for your future career or profession:

.....

\_\_\_\_\_

\_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

# REFERENCES

(PLEASE SEE REVERSE)

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

**“WHAT DOES THIS SCHOLARSHIP MEAN TO ME?”**

Please list all extracurricular activities, interests, special skills and community involvement. (THIS IS VERY IMPORTANT)

List three people, two of whom must be teachers, whom you are asking to complete and return the Letter of Reference form directly to the IBEW Local Union 1620 office in St. John's.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Occupation

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone #

\_\_\_\_\_  
Name

\_\_\_\_\_  
Occupation

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone #

\_\_\_\_\_  
Name

\_\_\_\_\_  
Occupation

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone #

\_\_\_\_\_  
Name of High School you are attending

\_\_\_\_\_  
Telephone #