

# Robert Schlieve SR Memorial Scholarship

The Robert Schlieve SR Scholarship Fund awards Scholarships annually to outstanding students attending College or Technical College.

All applicants must comply with the following eligibility and applicant criteria. Each applicant must:

1. Be the son, daughter or grandchild of an active, retired, disabled, deceased or laid-off Teamster member who has or had at least twelve months of consecutive membership in good standing in the Teamsters Union.
2. Plan to attend an accredited College or Technical College.
3. Be in the top 15% of his/her class.

## APPLICATION PROCEDURE

1. Applicant and Teamster parent/grandparent completes questions 1-14:
2. Attach your list of activities (VERY IMPORTANT)
3. Applicant's guidance counselor completes the section marked "Academic Record".
4. Forward your completed application (including your list of activities) and your Academic Record to your Teamster Parent's /Grandparent's Local Union at least two (2) weeks prior to the application deadline.

Forward to: Teamsters Local Union 662  
P O BOX 174  
Appleton, WI 54912

Scholarship application will not be processed after **March 31, 2010**.

PLEASE COMPLETE THE FOLLOWING:

1. Student Name: \_\_\_\_\_
2. Address: \_\_\_\_\_  
\_\_\_\_\_
3. Home Phone: \_\_\_\_\_
4. E-mail address: \_\_\_\_\_
5. Date of Birth: \_\_\_\_\_
6. Name of accredited college or technical college you plan to attend:

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7. Name of Teamster Parent/Grandparent: \_\_\_\_\_
  8. Employers name: \_\_\_\_\_
  9. Teamster Parent/Grandparent Social Security Number: \_\_\_\_\_
  10. Local Union No. \_\_\_\_\_

**Membership verification to be completed by Local Union Office**

1. I hereby certify that the above named Teamster member has not been a full-time elected officer of this Local Union, Division, and has been a member in good standing (check the appropriate letter below):
  - a. \_\_\_ a minimum of 12 consecutive months prior to the application deadline **of March 31, 2010.**
  - b. \_\_\_ a minimum of 12 consecutive months prior to his/her  
(circle one): retirement/disability/death.
  - c. \_\_\_ for a minimum of 12 consecutive months prior to his/her layoff. Date of layoff: \_\_\_\_\_
  - d. \_\_\_ however, has not been a Teamsters member for a minimum of 12 consecutive months prior to the application deadline **of March 31, 2010**, but has had 12 consecutive months of membership in good standing at some other time.  
Dates of prior membership: \_\_\_\_\_ Must presently be a Teamster member.
  - e. \_\_\_ since \_\_\_ after his/her transfer from Local Union \_\_\_\_\_. I have checked into his previous membership record with Local Union (s) \_\_\_\_\_ and his/her total consecutive months of membership in good standing add up to 12 months (check one): \_\_\_ yes \_\_\_ no.
2. I verify, on the basis of the Teamster parent's/grandparent's membership record, that his/her child/grandchild is eligible to apply for this scholarship (check one) \_\_\_ yes \_\_\_ no.
3. Signature of Secretary-Treasurer  
\_\_\_\_\_

Upon completion please forward this application to: Teamsters Local Union 662

P O Box 174

Appleton, WI 54912

ESTIMATED FINANCIAL NEED

List the total anticipated amount you will need for the year,

Include the cost of tuition plus expenses of room and board, transportation and books. \$ \_\_\_\_\_

List the financial aid programs in which you will participate or have applied for:

Source: \_\_\_\_\_ minus \$ \_\_\_\_\_

Source: \_\_\_\_\_ minus \$ \_\_\_\_\_

Amount you will receive from any other source, Parents, employment, gifts. \$ \_\_\_\_\_

Calculate the net amount you will need by subtracting your funding for the above

Sources \_\_\_\_\_ NET Amount Needed: \$ \_\_\_\_\_

Please provide any additional information that you believe would be helpful to the Scholarship Committee in assessing your personal or financial need.

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I certify, to the best of my knowledge, that this information is accurate and complete.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

**Attach an outline of all your activities, work experience, honors, distinctions and achievements.**

**MUST BE COMPLETED BY THE APPLICANT'S SCHOOL OFFICIAL** Due date: March 31, 2009

Name of Student: \_\_\_\_\_ Name of School \_\_\_\_\_

**STUDENT Class Ranking:**

Student ranks exactly/approximately \_\_\_\_\_ in a class of \_\_\_\_\_ students at the end of \_\_\_\_\_.

If exact rank is not available, please provide: Class size \_\_\_\_\_ Decile/percentile \_\_\_\_\_

Indicate if student has taken SAT II in lieu of class rank. \_\_\_\_\_ attach Scores.

**High School Transcript: Please attach an official transcript bearing the school's seal or principal's signature.**

**GRADE POINT AVERAGE:** Student has cumulative Un-weighted GPS of \_\_\_\_\_ at the end of \_\_\_\_\_.

**TEST SCORES:**

**SAT SCORES**

Critical Reading \_\_\_\_\_ Math \_\_\_\_\_ Writing \_\_\_\_\_ Test Date \_\_\_\_\_

Critical Reading \_\_\_\_\_ Math \_\_\_\_\_ Writing \_\_\_\_\_ Test Date \_\_\_\_\_

Critical Reading \_\_\_\_\_ Math \_\_\_\_\_ Writing \_\_\_\_\_ Test Date \_\_\_\_\_

**ACT SCORES**

English \_\_\_\_\_ Math \_\_\_\_\_ Reading \_\_\_\_\_ Science \_\_\_\_\_ Composite \_\_\_\_\_ Test Date \_\_\_\_\_

English \_\_\_\_\_ Math \_\_\_\_\_ Reading \_\_\_\_\_ Science \_\_\_\_\_ Composite \_\_\_\_\_ Test Date \_\_\_\_\_

**SAT II TEST SCORES** (Required only if Class Rank is not available)

\_\_\_\_\_ English \_\_\_\_\_ Math Level I \_\_\_\_\_ American History

\_\_\_\_\_ Math Level II \_\_\_\_\_ Biology

\_\_\_\_\_ Chemistry

\_\_\_\_\_ European History

\_\_\_\_\_ Physics

\_\_\_\_ I have enclosed an official copy of the student's test scores and verify that the above information is correct.

\_\_\_\_ the applicant has requested that the testing agency forward a copy of his/her test scores.

E. Name of High School / School \_\_\_\_\_

Signature of official \_\_\_\_\_