



OFFICIAL APPLICATION

MICHAEL J. QUILL
SCHOLARSHIP FUND



NOTE TO ALL APPLICANTS

1. Fill out Section A yourself. Answer all questions.
2. Section B requires the signature of the relative, if alive, on whose TWU membership your eligibility depends.
3. Section C should be filled out by either the TWU President or Secretary-Treasurer of the local union to which your parent belongs (brother or sister in case you are a dependent brother or sister of a TWU member).
4. Section D should be completed by the principal of your high school.
5. Once the entire application has been completed and signed, mail it to the Michael J. Quill Scholarship Fund at the address below.
No fax or email applications will be accepted.

**APPLICATION MUST BE POSTMARKED NO LATER THAN
APRIL 26, 2019 NO EXCEPTIONS**

TRANSPORT WORKERS UNION OF AMERICA, AFL-CIO
501 3rd Street NW, 9th Floor
Washington, DC 20001
www.twu.org

SECTION A.

Name: _____ Sex: Male Female
(last) (first) (middle)

Home Address: _____
(street) (city or town) (state) (zip)

Telephone: _____ Email: _____

I submit that I am eligible for a Michael J. Quill Scholarship because I am the _____
(state relationship here)

of _____ who resides at _____;
(street) (city or town) (state) (zip)

is employed by _____
(name) (address)

and sponsors this application.

If the relative on whose membership in TWU your eligibility depends is a former member, or is deceased, please give particulars here:

What High School, or secondary school, are you attending?:

(name) (address) (city or town) (state) (zip)

Are you in your Senior year? _____ If not, explain: _____

What College or University do you plan to attend?

First Choice: _____ Location: _____
(city or town) (state)

Second Choice: _____ Location: _____
(city or town) (state)

Third Choice: _____ Location: _____
(city or town) (state)

Have you been accepted by a College or University as of this date? Yes _____ No _____ If the answer is yes, in what college or University are you accepted: _____

Do you fully intend to obtain a college education: Yes _____ No _____ If the answer is NO, explain:

I fully understand that if I am successful in winning a scholarship, its renewal for each succeeding year will depend on my successful completion of the regular course of studies in the preceding year as attested by the college.

I also fully understand and agree that this application will be governed by the Rules established by the Trustees of the Michael J. Quill Scholarship Fund and that in their interpretation and application and in any other issue that might arise as the result of this application, the decision of the Trustees will be final and binding.

Date

Signature of Applicant

