

# Richard C. Felch Memorial Scholarship Application - 2021

APPLICANT'S  
NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HIGH SCHOOL \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

DATE OF GRADUATION \_\_\_\_\_

SOCIAL SECURITY NO. \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ MALE \_\_\_\_\_ FEMALE \_\_\_\_\_

COLLEGE OR UNIVERSITY OF YOUR CHOICE:

1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

PARENT/GRANDPARENT MEMBER'S  
NAME \_\_\_\_\_

TEL. NO. \_\_\_\_\_

MEMBER'S  
ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

EMPLOYER'S  
NAME \_\_\_\_\_

UNION SEAL

SPACE BELOW TO BE FILLED IN BY THE PRESIDENT OF THE LOCAL UNION

I hereby certify that the Applicant named above is eligible to apply for the Teamsters Local #42 Scholarship Grants. I further certify that said Applicant is a child, stepchild or legally adopted child or grandchild of the Member named above, and that said Parent/Grandparent is in good standing of Local #42

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

**MANDATORY DOCUMENT THAT MUST BE ATTACHED TO THIS APPLICATION:**

**LETTER OF ACCEPTANCE TO ONE OR MORE OF THE ABOVE SCHOOLS**

NOTE: Must be signed by the Applicant

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

SIGNATURE OF PARENT/GRANDPARENT MEMBER OF LOCAL NO. 42

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