

TEAMSTERS LOCAL 399 CHARITY FUND, INC. LEO T. REED MEMORIAL SCHOLARSHIP FUND

For Graduating High School Seniors

OFFICIAL APPLICATION -

The 9th Annual Leo T. Reed Memorial Scholarship Fund is now available to apply.

The Teamsters Local 399 Charity Fund manages the fundraising efforts and administration of this program. The scholarship program is intended to assist graduating high school seniors embarking on their first year of college, vocational program, or trade school.

This year, the Charity Fund will be awarding \$5,000 to the top (20) applicants.

To apply, please complete the application in its entirety and either mail or drop-off at the Local Union Hall on or before June 14th, 2024.

TEAMSTERS LOCAL 399

Leo T. Reed Scholarship Fund 4747 Vineland Avenue North Hollywood, CA 91602

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Eligibility Requirements:

- No children of Teamsters Local 399 Fulltime Union Employees.
- Applications received after June 14th will not be considered.
- Must be graduating High School Senior in the 2023-2024 School Year.
- Student must be accepted by an accredited University, College Vocational or Trade School to apply.
- Incomplete applications will not be considered.

STUDENTS: You must fill out ALL information requested. You must **Print / Type** clearly. Please be sure to enclose the following with your application:

- 1. A digital 'head shot' photograph of yourself.
- 2. Your official High School Transcripts through the 2023 Fall Semester.
- 3. Proof of acceptance to the selected university, college, vocational or trade school.

APPLICATION DEADLINE: June 14th, 2024.

| FIRST NAME: | LAST NAME: | | | | | |
|-------------------------------|--------------------------------|--|--|--|--|--|
| MAILING ADDRESS: | | | | | | |
| CITY: | STATE: ZIPCODE: | | | | | |
| MOBILE PHONE: | EMAIL: | | | | | |
| 399 CLASSIFICATION / EMPLOYE | ER: | | | | | |
| 2. STUDENT INFORMATIO | N: | | | | | |
| FIRST NAME: | LAST NAME: | | | | | |
| ADDRESS (IF DIFFERENT FROM P. | ARENT'S ADDRESS): | | | | | |
| GENDER: | DATE OF BIRTH: / / | | | | | |
| MOBILE PHONE: | EMAIL: | | | | | |
| HIGH SCHOOL NAME: | GPA: | | | | | |
| HIGH SCHOOL ADDRESS: | | | | | | |
| HIGH SCHOOL PHONE: | EXPECTED GRADUATION DATE:/2024 | | | | | |
| 3. LIST OF COLLEGE PREF | FERENCES: | | | | | |
| COLLEGE NAME: | CITY/ STATE | | | | | |
| COLLEGE NAME: | CITY/ STATE | | | | | |
| COLLEGE NAME: | CITY/ STATE | | | | | |
| ANTICIDATED EIEI D OE STUDY. | | | | | | |

1. PARENT INFORMATION:

| 4. AWARDS / EXTR (including, but not l employment, activi | imited to, athlet | ics, student g | | |
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| Be sure to enclose with your at 1. An original 'head shot' photog 2. Your official high school trans 3. Proof of acceptance to the set In submitting this information knowledge. | graph of yourself (no paper of script through the 2023 fall selected university, college, vo | emester. | best of n |
|--|---|------------------|-----------|
| Applicant Signature | Date | Parent Signature | Dat |
| OR 399 OFFICE USE | | | |
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