

NATIONAL POSTAL MAIL HANDLERS UNION

DIVISION OF LABORERS' INTERNATIONAL UNION OF NORTH AMERICA

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2024/2025 APPLICATION FOR SCHOLARSHIP LOCAL 304 NPMHU

NAME: _____
LAST FIRST MIDDLE

ADDRESS: _____
STREET CITY STATE ZIP CODE

TELEPHONE: (_____) _____ DATE OF BIRTH ____/____/____
M M DD YEAR

SOCIAL SECURITY # _____

NAME OF HIGH SCHOOL ATTENDED: _____

GRADE POINT AVERAGE (GPA) OR GED SCORE: _____

ON AN ATTACHED SHEET, PLEASE GIVE NAME, ADDRESS AND TELEPHONE NUMBER(S)
OF ACADEMIC INSTITUTION THAT YOU WILL BE ATTENDING DURING 2023/2024 SCHOOL YEAR.

WILL YOU BE ATTENDING FULL-TIME? YES NO

SAT SCORE ACT SCORE _____ FIELD OF STUDY: _____

FATHER: _____ MOTHER: _____

NPMHU MEMBER SSN: _____

BRANCH: _____ TELEPHONE # (____) _____ Attach an ESSAY
to the application with a minimum of 200 words about,

"What are you majoring in and what does success look like in your career of choice

10 years from now?" I, the applicant, by signing below, state that I have applied or an enrolled in an undergraduate program in a college or university for the fall year in which the scholarship is awarded and that a parent or legal guardian is a member in good standing with the National Postal Mail Handlers Union, Local 304. I, the applicant agree that should I become a successful candidate for the NPMHU Local 304 scholarship, I hereby give permission to the NPMHU Local 304 to publish my name, photograph and essay.

Signature of Applicant

Date

Signature of Parent or Guardian

Date