



***** APPLICATION *****



Joseph A. Main
AFGE/UMWA Scholarship
At California University of
Pennsylvania

NAME (First)		(Middle)		(Last)	
HOME ADDRESS (Number & Street)					
(City)		(State)		(Zip Code)	
PLACE OF BIRTH		HOME PHONE		SOCIAL SECURITY NUMBER	
NAME OF UMWA OR AFGE MEMBER AND YOUR RELATIONSHIP TO THIS PERSON				LOCAL UNION NO.	
HIGH SCHOOL/POST SECONDARY SCHOOLS ATTENDED					
ADDRESS				PHONE	
GPA	CLASS RANK	SAT SCORES V M		INTENDED MAJOR	
EXTRACURRICULAR ACTIVITIES, MEMBERSHIPS, ACTIVITIES, HONORS, ETC. (USE REVERSE SIDE IF NEEDED)					
SIGNATURE OF APPLICANT				DATE	
SIGNATURE OF UMWA OR AFGE MEMBER				DATE	

Instructions:

1. Print or type all information clearly.
2. Return completed application and applicable transcripts to:

President, AFGE Local 1916
P. O. Box 231
South Park, PA 15129

NOTE: This scholarship is applicable only at California University of PA.