



UAW REGION 9

UAW Region 9 - TOM FRICANO SCHOLARSHIP APPLICATION

(Please print clearly or type)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_  
(Please include area code)

Check one of the following:  UAW Member  Dependent of Member  Grandchild of Member

If other than member, your relationship to UAW member (Check one)

Daughter or Son  Granddaughter/son  Stepdaughter/son  Spouse

\*Name of UAW Member (if other than applicant) \_\_\_\_\_

\*UAW Member's Local Union Number \_\_\_\_\_

School from which you have/will have graduated \_\_\_\_\_

Name and address of the school you are attending/planning to attend using these scholarship funds

\_\_\_\_\_  
\_\_\_\_\_

Have you applied for admission? \_\_\_\_\_ Date of Acceptance \_\_\_\_\_

Date of Admission \_\_\_\_\_ Classification (if already in college) \_\_\_\_\_

Field of Study \_\_\_\_\_ Number of years required to complete \_\_\_\_\_

List any other scholarships received

\_\_\_\_\_  
\_\_\_\_\_

List honors, awards, etc. received for scholastic achievement, community service, etc.

\_\_\_\_\_  
\_\_\_\_\_

List any jobs you have held since you entered high school and the dates of employment

\_\_\_\_\_  
\_\_\_\_\_

List any volunteer work you have done during high school and dates of service

\_\_\_\_\_  
\_\_\_\_\_

List of clubs, activities, etc. you participated in during high school and/or hobbies

\_\_\_\_\_  
\_\_\_\_\_

Bonus Question. Name the 11 Presidents of the International UAW from 1935 to the present

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_
9. \_\_\_\_\_
10. \_\_\_\_\_
11. \_\_\_\_\_

**References** (Not relatives. Include at least one teacher, other than your Counselor)

Name: \_\_\_\_\_ Occupation: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Occupation: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Occupation: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

**\*NO APPLICATIONS WILL BE ACCEPTED WITHOUT THE LOCAL UNION MEMBER'S NAME AND LOCAL**

Indicate by checkmark that the following are enclosed (incomplete applications will not be accepted)

- Application Form       Academic Report       Academic Transcript       500 Word Essay

Date: \_\_\_\_\_ Signature of Applicant: \_\_\_\_\_



**Must be postmarked no later than July 7, 2017 to:**

UAW Region 9 - Tom Fricano Scholarship Fund  
c/o Region 9 UAW  
35 George Karl Boulevard  
Amherst, NY 14221

*(Applicant must maintain the equivalent of a "C" average for continuation of the scholarship)*