

2025 TEXAS AFL-CIO **SCHOLARSHIP APPLICATION**

(FOR HIGH SCHOOL SENIORS ONLY)

This form must be filled out completely and signed by applicant, a parent or legal guardian and Union Officer. You must attach a copy of your high school transcript and a photograph (head shot) for processing.

ATTACH HEAD SHOT HERE

Incomplete applications will not be processed.

PART A - PERSONAL DATA		
APPLICANT'S NAME:	SEX	: F
HOME ADDRESS:	CITY:	ZIP:
E-MAIL:		
HOME PHONE: CELL F	PHONE:	
MOTHER OR LEGAL GUARDIAN'S NAME:	OCCUPATION:	
HOME ADDRESSCI	TY:	_ZIP:
FATHER OR LEGAL GUARDIAN'S NAME:	OCCUPATION:	
HOME ADDRESS:	CITY:	_ZIP:
PERMISSION TO PUBLICIZE PHOTO:YES _	NO	
PART B - ACADEMIC DATA		
HIGH SCHOOL:	PRINCIPAL:	
MAILING ADDRESS:	CITY:	ZIP:
WHAT EXTRA CURRICULAR ACTIVITIES (INCLUDING	G JOBS HELD) DO YOU PARTICI	PATE IN?
ARE YOU REGISTERED TO VOTE?	COUNTY: _	
WHAT COLLEGE DO YOU HOPE TO ATTEND?		
DESCRIBE ANY SPECIAL CIRCUMSTANCES (HARDSH LAY-OFFS, ETC.:	IPS) CREATED BY HEALTH PRO	BLEM, STRIKE
LIST ANY SCHOLARSHIPS YOU HAVE APPLIED FOR A	AND/OR RECEIVED	
PADENT OD I FCAL CHADDIAN'S SIGNATUDE	ADDI ICANT'S SIGNATUDE	

PART C - AFFILIATION ARE YOU A UNION MEMBER? _____YES _____NO IF YES, GIVE FULL NAME OF LOCAL UNION AND NUMBER: IS MOTHER OR LEGAL GUARDIAN A UNION MEMBER? _____ YES _____ NO IF YES, GIVE FULL NAME OF LOCAL UNION AND NUMBER: IS FATHER OR LEGAL GUARDIAN A UNION MEMBER? _____ YES ___ NO IF YES, GIVE FULL NAME OF LOCAL UNION AND NUMBER: GIVE FULL NAME OF CENTRAL LABOR COUNCIL HIS/HER UNION IS AFFILIATED WITH: PART D – OFFICER SIGNATURE/CLC AFFLIATION (THE PART BELOW MUST BE COMPLETED BY LOCAL UNION PRESIDENT, BUSINESS MANAGER OR SECRETARY-TREASURER – NO EXCEPTIONS!!) I CERTIFY THAT ____ ___ IS A MEMBER IN GOOD STANDING WITH (PARENT OR LEGAL GUARDIAN) LOCAL NUMBER _____ OF ____ UNION LOCATED CITY ZIP **ADDRESS** OUR LOCAL UNION IS AFFILIATED WITH THE CENTRAL LABOR COUNCIL/BODY. NAME OF UNION OFFICER POSITION HELD PHONE NUMBER **EMAIL**

THIS APPLICATION MUST BE POSTMARKED NO LATER THAN TUESDAY, JANUARY 31, 2025.

MAIL APPLICATION TO: TEXAS AFL-CIO EDUCATION DEPARTMENT P. O. BOX 12727, AUSTIN, TEXAS 78711

UNION OFFICER SIGNATURE & DATE

TEXAS AFL*CIO

2025 TEXAS AFL-CIO SCHOLARSHIP APPLICATION CHECKLIST

THANK YOU for applying for the Texas AFL-CIO Scholarship.

Please use this checklist to ensure that all required documents and signatures are included on your application to be considered for the scholarship.

Part A – Personal Data – please make sure to include applicant's email and phone number.

Part B – Academic Data

Part C – Affiliation – one or both parents/legal guardians are members of a local union.

Part D – Officer Signature/CLC Affiliation – this must be completed and signed by Union Officer. If not completed, application will be considered incomplete.

Headshot Photo – please mark "yes or no" to publicize picture in Part A

High School Transcript

PLEASE KEEP IN MIND THAT INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED.

TO AVOID ANY MAIL DELAYS, WE ENCOURAGE YOU TO SUBMIT YOUR APPLICATION ELECTRONICALLY AS WELL TO THE FOLLOWING EMAIL: SCHOLARSHIP@TEXASAFLCIO.ORG. PLEASE PUT YOUR FIRST & LAST NAME IN THE SUBJECT LINE

THIS APPLICATION MUST BE POSTMARKED NO LATER THAN WEDNESDAY, JANUARY 31, 2025.

MAIL APPLICATION TO: TEXAS AFL-CIO EDUCATION DEPARTMENT P. O. BOX 12727, AUSTIN, TEXAS 78711