

THE JAMES R. HOFFA MEMORIAL SCHOLARSHIP FUND

Application for the 2011 - 2012 Academic Year of the James R. Hoffa Memorial Scholarship Fund Application deadline March 31, 2011

James R. Hoffa became a Teamsters Member in 1934, served as General President for fourteen years, and, in recognition of his tireless service to the Union and its members, was honored as General President Emeritus for life. General Secretary-Treasurer, C. Thomas Keegel presented at the November 1999 General Executive Board meeting, a resolution to establish the James R. Hoffa Memorial Scholarship Fund.

The James R. Hoffa Memorial Scholarship Fund awards scholarships annually to outstanding high school seniors. All applicants must comply with the following eligibility and application criteria. **Each applicant must:**

1. Be the son, daughter or grandchild of an active, retired, disabled, deceased or laid-off Teamster member who has or had at least twelve months of consecutive membership in good standing in the Teamsters Union;
2. Be in his/her last year of high school and may not apply if he/she has already graduated from high school;
3. **Be in the top 15% of his/her high school class;**
4. Plan to submit excellent SAT or ACT scores for evaluation (U.S. only);
5. Plan to attend an accredited four-year college or university. Those who plan to attend non-academic or certificate programs or community college, may not apply.

APPLICATION PROCEDURE (USE AS A CHECKLIST)

1. Applicant and Teamster parent/grandparent completes questions 1-14;
2. Attach your list of activities (**VERY IMPORTANT**);
3. Applicant's guidance counselor (or equivalent high school official) completes the section marked "Academic Record";
4. Forward your completed application (including your list of activities) and your Academic Record to your Teamster Parent's/Grandparent's Local Union, System Federation or National Division. The Secretary-Treasurer will complete the section marked "Membership Verification" and forward the completed application to the Scholarship Fund. Local Unions must send completed applications to the Scholarship Fund by March 31, 2011. We recommend submitting completed applications to the Secretary-Treasurer two weeks prior to the application deadline.

*Applications without activities list, membership verification or received by
the Scholarship Fund after March 31, 2011, will not be processed.*



PLEASE COMPLETE THE FOLLOWING:

1. Name

LAST (Do not include Jr., II, etc.) _____

FIRST (no nicknames) _____ MIDDLE INITIAL _____

2. Social Security Number (United States): _____

OR Social Insurance Number (Canadian): _____

3. Address (if address is a P.O. Box, please also include a physical street address.)

STREET _____

CITY AND STATE _____

ZIP OR POSTAL CODE _____

4. Contact Information

HOME PHONE # _____ ALTERNATE PHONE # _____

E-MAIL ADDRESS _____

5. Sex M F **Date of Birth** _____
month day year

6. High School _____
Name and Address

7. Expected Date of High School Graduation _____ 2011.
month

Please note, if you have already graduated from high school or if you are not graduating during the current academic year (2010-2011), you may not apply.

8. Canadian Students: In 2011, I will complete _____ Junior Matriculation.
_____ Senior Matriculation.

9. Full names of the accredited colleges to which you have applied or plan to attend.

First Choice _____
Name City and State

Second Choice _____
Name City and State

10. Teamster Affiliation IBT BMWED BLET GCC TCRC Local Union/Division #: _____

Local Union Address _____

11. Full Name of Teamster Parent/Grandparent _____

12. Employer Name/Address/Occupation _____

13. Teamster Parent's/Grandparent's Ledger or Social Security/Insurance Number _____

14. Estimated Financial Need

List the total anticipated amount you will need for the year. Include the cost of tuition plus expenses of room and board, transportation and books. \$ _____

List the financial aid programs in which you will participate or have applied for, such as partial scholarships provided by the school, an alumni association, government or other group.

Source: _____ minus \$ _____

Source: _____ minus \$ _____

List funds you will receive from any other source, such as parental assistance, employment or gifts. minus \$ _____

Calculate the net amount you will need by subtracting your funding (from financial aid and any other sources listed above) from your total amount needed. **NET AMT. NEEDED** \$ _____

Please provide any additional information that you believe would be helpful to the Scholarship Committee in assessing your personal or financial need.

I certify, to the best of my knowledge, that this information is accurate and complete.

Applicant Signature Date Parent's Signature Date

STOP!!

**Attach an outline of all your activities, work experience, honors, distinctions and achievements.
(THIS APPLICATION WILL NOT BE PROCESSED WITHOUT THIS ACTIVITIES LIST.)**

**FORWARD TO THE LOCAL UNION, SYSTEM FEDERATION
OR BLET NATIONAL DIVISION**

The following section must be completed by your Teamster Parent's/Grandparent's Local Union. This application will not be processed without the attached membership verification.

LU/Lodge/Div. #: _____

SECRETARY-TREASURER'S MEMBERSHIP VERIFICATION

1. I hereby certify that the above-named Teamster member has not been a full-time elected officer of this Local Union, Division, or Lodge and has been a member in good standing (check the appropriate letter below):

- a. ____ for a minimum of 12 consecutive months prior to the application deadline of March 31, 2011.
- b. ____ for a minimum of 12 consecutive months prior to his/her (circle one); retirement/disability/death.
- c. ____ for a minimum of 12 consecutive months prior to his/her layoff.

Date of layoff: _____

- d. ____ however, has not been a Teamster member for a minimum of 12 consecutive months prior to the application deadline of March 31, 2011, but has had 12 consecutive months of membership in good standing at some other time.

Dates of prior membership: _____ Must presently be a Teamster member.

- e. ____ since ____ after his/her transfer from Local Union _____. I have checked into his previous membership record with Local Union(s) _____ and his/her total consecutive months of membership in good standing add up to 12 months (check one): yes no.

2. I verify, on the basis of the Teamster parent's/grandparent's membership record, that his/her child/grandchild is eligible to apply for this program (check one): yes no.

3. Signature of Secretary-Treasurer

**BMWED members must send to the System Federation Secretary-Treasurer for signature

**BLET members must send to the National Secretary-Treasurer for signature

signature

print

date

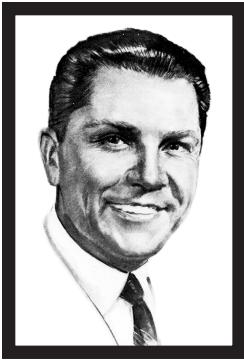
After March 31, 2011, applications will not be processed by the Scholarship Fund.

Upon completion please forward this application to:

**JAMES R. HOFFA MEMORIAL SCHOLARSHIP FUND
25 LOUISIANA AVENUE, N.W., WASHINGTON, D.C. 20001**

The Scholarship fund was established as a non-profit, stand alone, charitable incorporated organization (501 (c)(3) identification #52-2206826), which will raise significant money from affiliates and outside sources to award Teamster dependents higher scholarships than have been possible in the past. Although children represent less than 25 percent of the population in our countries, they are one hundred percent of our future!

Scholarship recipients are selected on the basis of scholastic achievement, aptitude, personal qualifications and financial need by the Scholarship Selection Committee. We consider all applicants without regard to race, religion, gender, disability or an other legally protected status. Due to the number of applicants to this program and because the program is extremely competitive, only those students who exemplify academic excellence should apply.



THE JAMES R. HOFFA MEMORIAL SCHOLARSHIP FUND

U. S. Social Security #

Canadian Social Insurance #

ACADEMIC RECORD 2011-2012 SCHOLARSHIP FUND PROGRAM

Must be completed by the applicant's high school official

Due Date: March 31, 2011

Please print:

Applicant's Name _____
Last First Middle

I. HIGH SCHOOL INFORMATION

Name of Secondary School _____

Address _____ Phone # _____

II. CLASS RANK (If information is left blank, then student's application will not be processed.)

a. Please indicate the student's exact or approximate rank in class, preferably at the end of the junior year.

**If exact rank is not available, see b.

Student ranks exactly/approximately _____ in a class of _____ students at the end of _____.

b. If exact rank is not available, please provide:

Class size _____ Decile/percentile _____.

c. Indicate if student has taken SAT II in lieu of class rank. _____ (Attach Scores)

III. GRADE POINT AVERAGE

Please indicate the student's **un-weighted grade average** in the spaces below. (Must be on a 4.0 scale)

Student has cumulative un-weighted GPA of _____ at the end of _____.

IV. HIGH SCHOOL TRANSCRIPT

Please attach an official transcript bearing the school's seal or principal's signature to the third page of this form. Please note that the transcript is to include all high school grades through the junior year.

Please ensure that the transcript is attached securely.



V. SAT, ACT AND SATII SCORES (Please refer to page 4 of this form)

The applicant is required to submit either SAT or ACT scores. In deciding which test to take, the applicant should consult the school he or she plans to attend. An official copy of the student's test scores may be attached to this form or the applicant may have the testing agency forward a copy of the test results. SAT II test scores are required only if the student's class rank is not available.

HOME SCHOOL STUDENTS MUST TAKE THE SAT II FOR ELIGIBILITY

CANADIAN AND PUERTO RICAN APPLICANTS ONLY

The applicant is required to submit three (3) Letters of Recommendation in lieu of SAT/ACT scores.

1. Two academic letters (i.e., teacher, principal or counselor)
2. One personal letter (i.e., employer or neighbor, not a family member or yourself)

PLEASE ATTACH LETTERS OF RECOMMENDATION WITH OFFICIAL TRANSCRIPT (attach to page 3)

Please return this form to the student so that the entire application may be forwarded to the Teamster parent's/grandparent's Local Union, System Federation or National Division.

REMEMBER TO ATTACH AN OFFICIAL TRANSCRIPT!
(Please attach transcript and/or test scores)

U. S. Social Security #

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Canadian Social Insurance #

□ □ □ □ □ □ □ □ □ □

TEST SCORES

A. SAT SCORES (Space is provided for multiple test dates)

Critical Reading _____ Math _____ Writing _____ Test Date _____

Critical Reading _____ Math _____ Writing _____ Test Date _____

Critical Reading _____ Math _____ Writing _____ Test Date _____

B. ACT scores

English _____ Math _____ Reading _____ Science _____ Composite _____ Test Date _____

English _____ Math _____ Reading _____ Science _____ Composite _____ Test Date _____

C. SAT II TEST SCORES

(REQUIRED ONLY IF CLASS RANK IS NOT AVAILABLE)

- _____ English
- _____ Math Level I
- _____ Math Level II
- _____ American History
- _____ Biology
- _____ Chemistry
- _____ European History
- _____ Physics

D. HIGH SCHOOL CHECKLIST (Check one):

I have enclosed an official copy of the student's test scores and verify that the above information is correct.

The applicant has requested that the testing agency forward a copy of his/her test scores.

E. NAME AND TITLE OF HIGH SCHOOL _____

SIGNATURE OF OFFICIAL _____

name

title