

Metro Area Transit Transport Workers Union, Local No. 223

SCHOLARSHIP FUND

The Fund

The Fund is providing the scholarships through the cooperative arrangement between the Transit Authority of the City of Omaha (MAT) and the Transport Workers Union of America, Local 223 (TWU) and OEA Foundation.

The fund will provide annually, at a minimum, two college scholarships.

The scholarship will be furnished to the successful candidate in two installments of equal amount: one in August and the other upon supplying evidence of successful completion of the first semester of post-high school education.

The scholarship money will be paid directly to the student and may be used for tuition, college fees, or room and board while attending college and pursuing an undergraduate degree.

Application Form

This form must be filled out and signed by the applicant.
Send the completed application form, with a recent photograph attached, to the OEA Foundation.

Name _____ Sex M _____ F _____
(last) (first) (M.I.)

Home Address _____
(street) (city) (State) (zip) (phone #)

I submit that I am eligible for a MAT/TWU Scholarship because I am the _____
(relationship)
of _____ who
(employee)
resides at _____ and
(street) (city) (State) (zip) (phone #)
sponsors this application.

If the relative on whose employment by MAT, your eligibility depends, is a retired employee, or deceased, please give details here: _____

What High School are you attending? _____
(name) (address) (city) (state) (zip)

Are you in your Senior year? _____ If not, explain: _____

What college or University or Vocational Training Institution do you plan to attend?

First Choice: _____ Location: _____
(city) (state)

Second Choice: _____ Location: _____
(city) (state)

Third Choice: _____ Location: _____
(city) (state)

Have you been accepted by a College or University as of this date: Yes ___ No ___
If the answer is yes, in what college or university have you been accepted: _____

Do you intend to obtain a college education? Yes ___ No ___ If the answer is NO, explain: _____

The relative, if alive, on whose employment or retirement by MAT your eligibility depends, should sign the following statement:

I, _____ am the person named by the applicant as
the employee/retiree on whose employment the applicant's eligibility depends and I sponsor this
application. My relationship to the applicant is correctly stated in the application.

I have belonged to the following groups in school (check or list and label office or position held):

- | | |
|--|---|
| <input type="checkbox"/> President of Student Council | <input type="checkbox"/> JROTC Officer |
| <input type="checkbox"/> Other Student Government Office | <input type="checkbox"/> JROTC |
| <input type="checkbox"/> President of Class | <input type="checkbox"/> Editor, School Publication |
| <input type="checkbox"/> Student Council Member | <input type="checkbox"/> Yearbook/Newspaper |
| <input type="checkbox"/> Other Class Office | <input type="checkbox"/> Community Award, explain below |
| <input type="checkbox"/> National Honor Society | <input type="checkbox"/> Others, explain below |

Outside school I have participated in (check or list and label office or position held):

- | | |
|---|--------------------------------------|
| <input type="checkbox"/> Boy Scout | <input type="checkbox"/> Girl Scout |
| <input type="checkbox"/> Language or Science Club | <input type="checkbox"/> Church Club |
| <input type="checkbox"/> Other, explain below | |

During the past three years I have been employed outside school at:

Place of Employment	Type of Employment	Dates of Employment
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>

During the last three years I could not work because: _____

Other children in my family include: Names, ages, and occupation of brothers/sisters

<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>

My parents Names are: _____

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Eligibility

To be eligible for the scholarships, the candidate must:

1. Be related to Metro Area Transit personnel as:
 - a) The child or grandchild of an active employee, or
 - b) The child or grandchild of a deceased employee, or
 - c) The child or grandchild of a pensioner.
2. Be an individual whose person, character, and behavior are likely to reflect a credit to MAT and TWU.
3. Have demonstrated ambition and eagerness to help himself or herself.
4. Be a senior and actually attending high school or other corresponding secondary high school, who will enter an accredited college in the following Fall Term.

I have requested that the following be sent directly to the OEA Foundation:

1. Transcript of grades through the first semester of my senior year.
2. Letter of recommendation from my principal or counselor.
3. Letter of recommendation from employer, minister, neighbor, or any other adult who knows the candidate.

I will be available for personal interview if requested.

(signature)

MAT OFFICIAL

TWU OFFICIAL

Send Application to:
Omaha Education Association
4202 South 57th Street
Omaha, Nebraska 68117