

# The Joseph F. McWilliams Memorial Scholarship (\$1,000/year)

## Application for IATSE Local 251 Members/Family

### **Purpose of the scholarship:**

*Joe greatly valued education and life-long learning. This annual scholarship is made in his honor to support the educational pursuits of his fellow Local 251 union members and their families. Traditional university/college education and most any other formal educational/training programs (e.g., certifications) are eligible for this scholarship.*

### **Applicant Information:**

Name	
Street Address	
City State ZIP	
Phone	
e-Mail Address	
Name of High School (H.S.)	
Month and Year of H.S. Graduation	
Name of College, University, or Other Institution to be attended	
Degree major / area of focus	

### **Local 251 Union Member Information:**

Union Member Name	
Relation to Union Member (check one)	( ) Self ( ) Father ( ) Mother ( ) Other (specify) _____
Name/address/phone of primary work location of Union Member	Location Name / Address / Phone:

### **Essay Regarding Educational Interests and Submission:**

In your own words (500 words or less), please articulate how you would use the scholarship proceeds, why you are pursuing higher education at a university, college, or some other formal educational or training program, and why this education is important to you.

Please email your essay to the following electronic address:

NOTE: the US postal option is no longer available

#### **Via e-mail:**

[jmcmwms@gmail.com](mailto:jmcmwms@gmail.com)

Subject: JFM Memorial Scholarship

## Agreement and Signature(s)

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am awarded this scholarship, any false statements, omissions, or other misrepresentations made by me on this application may result in loss of the scholarship award or full reimbursement of funds already paid to me.

I hereby indicate my understanding that the decision of the scholarship fund in the selection of scholarship winners is final and binding. I also agree that, in the event I am selected as the successful applicant for a scholarship grant, I shall comply with all the rules and regulations outlined herein. I understand that receipt of this scholarship is conditioned upon presentation of evidence of payment of tuition or similar fee for training.

Applicant Name (printed)		Union Member Name (If different than applicant) (printed)	
Signature		Signature	
Date		Date	

## Scholarship Policies

It is the policy of IATSE and this scholarship fund to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

It is the intent of the scholarship fund to establish a one-thousand dollar (\$1,000) award each calendar year. Notwithstanding the foregoing, the fund may be suspended or discontinued at any time without notice.