



OFFICIAL APPLICATION for School year 2011-2012

G. I. JACKSON SCHOLARSHIP FUND (\$500.00)

Sponsored by: Communications Workers of America
Alabama General Fund

NOTES TO ALL APPLICANTS

Applications will be accepted **only between December 1 and February 29, 2012** to be eligible for the drawing to be held in mid-March of each year. Previous winners are ineligible.

INCOMPLETE APPLICATIONS WILL BE DISQUALIFIED

First: Fill out Section A yourself. Answer all questions.
Remember to sign your application.

Next: Take the application to the CWA Local Union to which your parent or grandparent belongs, and have a **Local officer** fill out **Section B**.

Finally: Do not attach school transcripts or other documents to this application. Winners are selected by a lottery-type drawing. Only one application per applicant per year will be accepted. Applicant has the responsibility of seeing that application is submitted by the **February 29, 2012** deadline.

WINNERS ONLY WILL BE NOTIFIED

SCHOLARSHIP RULES:

1. All selected winners of the G. I. Jackson Scholarship must meet both following eligibility requirements:
 - a. Applicants must be the child or grandchild (including step-children and adopted children) of a dues-paying member (or deceased member) in good standing. The member may be active, retired, laid-off or deceased, from an Alabama CWA Local.
 - b. Applicants must be enrolled or accepted in an institution of higher learning (including vocational, technical, 2-year and 4-year programs).
2. The applicant's signature verifies that he/she is able to accept the scholarship without jeopardizing other assistance applications.
3. The scholarship money will be sent directly to the academic institution. The funds may be used for tuition, books, and/or other expenses associated with the student's studies.
4. New applications must be submitted each year on the appropriate form.
5. Previous winners are ineligible.

Official G. I. JACKSON Scholarship Application

SECTION A (to be completed by applicant)

Name (last, first, m.i.)		Sex <input type="checkbox"/> M <input type="checkbox"/> F
Permanent Mailing Address		
City	State	Please use 9-Digit Zip Code (if known)
Applicant's Telephone: (____) _____	Applicant's Date of Birth: ____ / ____ / ____	Applicant's SS#: _____ - ____ - ____

Name of CWA Member: _____ Member SS#: _____ CWA Local # _____

Members Occupation: _____ Employer: _____

Members Address: _____ (Street) _____ (City, State) _____ (Zip)

Applicant's Relationship to Member Father Mother Grandfather Grandmother

College or University in which enrolled.

If selected for this scholarship, I fully agree to adhere by the rules that have been established by the Scholarship Committee for the G. I. Jackson Scholarship Fund:

Signature of Applicant _____ Date _____

SECTION B (to be completed by Local Officer)

This is to certify that (applicant) _____ is:

- The son, daughter, or grandson/daughter of an active, retired, or laid-off CWA member
- The son, daughter, or grandson/daughter of a deceased CWA member

(CWA Local) _____ (Signature of Local Officer) _____ (Title) _____ (Date) _____

**THIS COMPLETED FORM MUST BE POSTMARKED NO LATER THAN FEBRUARY 29, 2002 TO:
G. I. JACKSON SCHOLARSHIP FUND
2700 Highway 280 East, Suite 207W
Birmingham, Alabama 35223**