

FLORIDA FIRST COAST COALITION OF LABOR UNION WOMEN SCHOLARSHIP AWARD

The FFCCLUW Scholarship Award is a one-time \$500.00 scholarship given to a graduating high school senior. The organization awarding this scholarship is made up of women and men who are proactive members in the labor movement.

Our members are on the front line, empowering working women to become leaders in their unions and encouraging them to make a difference on the job, in their communities and most importantly, in their own lives.

If you are a graduating senior who:

- has at least a "C" average
- has applied to a technical school, an apprenticeship program, college or university
- is able to demonstrate that s/he is a good citizen at school and in the community - has a minimum of 50 hours of documented community service



How do I apply?

Any graduating senior wishing to apply for the CLUW scholarship must complete a scholarship application, be nominated by 2 union members, provide certification of his or her community service hours, furnish certification of his or her grade point average and write a 3 to 5 page essay on a woman or group of women and their contributions to the labor movement and how it has continued to benefit us to date.

The application packets must be completed and submitted to Florida First Coast CLUW at 966 Liberty Street, Jacksonville, Florida 32206, **no later than 5:00 P.M., FRIDAY, APRIL 7, 2023.**

Each applicant is required to sit for an interview with the members of the Scholarship Committee and/or Executive Board of FFCCLUW. Applicants under the age of 18 must be accompanied by their parent(s) or send written permission to attend. This meeting is mandatory and a part of the application process. **The date of the interview is Saturday, April 15, 2023.** You will be notified of the time.

An applicant may learn more about national CLUW at www.CLUW.org. For additional information concerning Florida First Coast CLUW, contact Shirley D. Thomas, President, at sdtjlcjt@aol.com. To get more information regarding the scholarship award you may contact Bunny Baker at IAMAWBunny@gmail.com.



**Florida First Coast
Coalition of Labor Union Women
Scholarship Award Application**

Last Name

First Name

Middle Initial

Address

City

State

Zip Code

Home Phone Number

Alternate Phone Number

Date of Birth

Age

Gender

Parents' Name

School to Which Applicant Has Applied and/or Been Accepted

Address

Phone Number

Area of Study

**HOW WILL THIS SCHOLARSHIP ASSIST YOU IN ACHIEVING YOUR
EDUCATIONAL GOALS (Please answer in 100 words or less).**

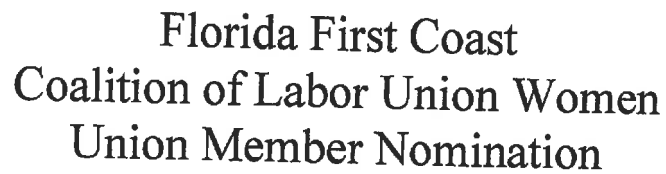
I hereby certify that all of the information I have submitted is accurate as of the date of this submission. I authorize members of the Florida First Coast CLUW Scholarship Committee to contact the school I attend, the organization(s) for which I have performed community service and/or union members who have nominated me for additional information if needed. If awarded the scholarship, I agree to the publication of my name and likeness in the media.

Signature of Applicant

Date

Signature of Parent (if under 18 years of age)

Date



Parents' Name _____

Local Union Affiliation Contact Person	Telephone Number



**Florida First Coast
Coalition of Labor Union Women
Certification of Grade Point Average**

High School Attending

Grade Point Average

Certification of Grade Point Average

As of the date of this application, the Grade Point Average reported by

_____ is accurate.
Name of Applicant

Signature of Administrative Staff Certifying GPA

Date

Print Name

Title of Administrative Staff Certifying Grade Point Average

Office Phone

Best Time to Call



**Florida First Coast
Coalition of Labor Union Women
Certification of Community Service Hours**

Number of Hours of Community Service _____

Organization for Which Community Service Was Performed _____

Address _____

Phone Number _____

Certification of Community Service

As of the date of this application, the Community Service hours reported

by _____ are accurate.
Name of Applicant

Signature of Staff Member Certifying Community Service Hours _____

Date _____

Print Name _____

Title of Staff Member Certifying Community Service Hours _____

Office Phone Number _____

Best Time to Call _____