



MARK A. ESPINOSA
President

Dear Scholarship Applicant:

This is your long form application for the Local 919 Scholarship Awards program. The officers, executive board and entire membership extend their warmest wishes for your future success.

Fraternally,
Mark A. Espinosa
President



Long Form Application

Scholarship Awards Competition Sponsored by United Food & Commercial Workers
Local 919, 6 Hyde Road, Farmington, Connecticut 06032-2802

You must fill in this form and then have the reverse side completed and signed by an official of the high school attended and mail it to the Local 919 Scholarship Selections Committee at the above address. The application must be printed clearly in ink or typewritten. Be sure to fill in all parts.

- Name _____ Soc. Sec. No. _____
(Last) (First) (Middle)
- Home Address _____
(Number) (Street) (City) (Zip Code)
- Date of Birth of Applicant _____ Sex _____ Married? _____ Home Phone _____
- Are you a member of Local 919? (Yes) (no) If not, is your parent a member? (Yes) (no)
- Parent's name (if a member) _____ Soc. Sec. No. _____
(Last) (First)
- Indicate any job experience you have had, including present job.

Name and address of Employer	Kind of position	Dates held

7. List every school you have attended whether you graduated or not, giving exact dates of attendance.

	Name and location	Date of Entrance	Date of Withdrawal	Diploma or Degree received	Reason for withdrawal other than graduation
High Schools					
Other					

8. In what student activities did you participate in high school. Please check.

- Nonathletic: band _____ glee club _____ orchestra _____ debate _____
 school publications _____ other _____
- Athletic: baseball _____ basketball _____ football _____ fencing _____ soccer _____
 swimming _____ track & field _____ tennis _____ other _____

9. List any offices held or honors received in these activities. _____

10. List any academic honors which you may have received. _____

I will graduate from High School (Check one):

- February, 2025 June, 2025

11. Check the career for which you are preparing.

- | | |
|---|---|
| _____ Liberal Arts (B.A.); Law | _____ Business Administration; Accounting |
| _____ Communication Arts, Teaching etc. | _____ Economics; Labor-Management |
| _____ Science; Engineering | _____ Physical Education |
| _____ Medical School, Pre-Dental | _____ Other |

I am currently attending _____ College / University

Applicant's Signature _____ Date _____

APPLICATION DEADLINE • MAY 31, 2025

Applicant's Character Report

TO BE COMPLETED ONLY BY AUTHORIZED SCHOOL OFFICIAL

The range scale below is based on the normal curve. Principals or headmasters are requested to use it by comparing the applicant with one or more recent and representative graduates of the same school who have been successful in college work, by entering check marks showing the results of the comparison in the appropriate spaces.

This information will, of course, be regarded as confidential.

Class standing of student _____ No. _____ out of _____

	Top 5%	Top 15%	Top 50%	Top 85%	Lowest 15%
Social Maturity					
Reliability					
Initiative					
Courtesy					
Cooperation					

How long and in what connection have you known the applicant? *(Please do not fail to answer this question).*

Do you wish to add further comments concerning this applicant which might prove helpful to the Admissions Committee?

School Official's signature _____

Date _____ Title _____

IMPORTANT NOTE

This form IS NOT A TRANSCRIPT, but merely an application. IT MUST BE ACCOMPANIED BY AN OFFICIAL HIGH SCHOOL AND COLLEGE TRANSCRIPT.

Also, applicants who have any emergency or extenuating situations (loss of parent(s), recent accident or illness, etc.) are invited to attach an accompanying note of explanation.

UFCW Local 919 Scholarship Forms

Check the website for printable forms

You can also request via a phone call or email to the union.

union@ufcw919.org

UFCW MEMBERSHIP HAS ITS BENEFITS