



TEAMSTERS

TEAMSTERS LOCAL 58

SCHOLARSHIP APPLICATION PACKET

Deadline April 11, 2025

ABOUT

Teamsters Local 58 Executive Board has continued the long-standing commitment to education in the communities we serve through scholarship awards. Our mission is to honor the hard work of our members by extending opportunities to Teamster dependents. We strive to inspire the next generation of workers and leaders to bring positive impact to their communities and beyond.

Teamsters Local 58 will offer three \$2,000 awards to dependents of the high school graduating class of 2025.

ELIGIBILITY REQUIREMENTS:

- Be the son, daughter or grandchild of an active, retired, disabled, deceased or laid-off Teamster member who has or had at least twelve months of consecutive membership in good standing in Teamsters Local 58
- Be a graduating 2025 high school senior
- Plan to attend an accredited four-year college/university or community college

HOW TO APPLY:

1. Review the entire application packet and ensure that you understand and meet all eligibility requirements.
2. Thoroughly complete applicant and Teamster member information.
3. Attach your outline of your activities, work experience, honors, distinctions and achievements.
4. Applicant's guidance counselor (or equivalent high school official) completes the section marked "Academic Record".
5. Obtain and submit an official high school transcript.
6. Submit your completed application to Local 58 by April 11, 2025, at 4:30 pm.

Applications not meeting the items listed above or received after the deadline will not be processed.

APPLICATION PACKET

APPLICANT INFORMATION

Name _____
FIRST M.I. LAST

Address _____
Street Address

City, State, Zip Code

Date of Birth: _____ Social Security Number: _____

Phone: _____ Email: _____

High School _____
Name and Address

Expected Date of High School Graduation: _____

Cumulative Grade Point Average (GPA): _____

College Preference: _____

Street Address, City, State, Zip Code

Intended Major: _____

College Preference: _____

Street Address, City, State, Zip Code

Intended Major: _____

TEAMSTER MEMBER INFORMATION

Full Name of Teamster Parent/Grandparent: _____

Employer: _____ Occupation: _____

Social Security Number: _____ Relationship: _____

Status (circle one): Active Retired Disabled Laid-Off Deceased

I certify, to the best of my knowledge, that I have read all portions of the Application packet and my answers are accurate and complete.

If this application leads to a scholarship, I understand that false or misleading information in my application may result in forfeiture of my scholarship.

Name Printed: _____

Signature: _____

Date: _____



TEAMSTERS

TEAMSTERS LOCAL 58 SCHOLARSHIP PROGRAM 2024-2025

ACADEMIC RECORD 2024-2025

Must be completed by the applicant's high school official.

Due Date: April 11, 2025

Please print:

Applicant's Name

First

MI

Last

HIGH SCHOOL INFORMATION

Name of Secondary School _____

Address _____

Phone _____

GRADE POINT AVERAGE

Please indicate the student's **un-weighted grade average** in the spaces below. **(Must be on a 4.0 scale)**

Student has cumulative un-weighted GPA of _____ at the end of _____.

HIGH SCHOOL TRANSCRIPT

Please attach an official transcript bearing the school's seal or principal's signature to the third page of this form.

Please note that the transcript is to include all high school grades through the junior year.

Please ensure that the transcript is attached securely.

SAT, ACT AND SATII SCORES

The applicant is required to submit either SAT or ACT scores. In deciding which test to take, the applicant should consult the school he or she plans to attend. An official copy of the student's test scores may be attached to this form or the applicant may have the testing agency forward a copy of the test results.

HOME SCHOOL STUDENTS MUST TAKE THE SAT II FOR ELIGIBILITY

PLEASE ATTACH LETTERS OF RECOMMENDATION WITH OFFICIAL TRANSCRIPT

Please return this form to the student so that the entire application may be forwarded to Teamster local 58.

REMEMBER TO ATTACH AN OFFICIAL TRANSCRIPT

(Please attach transcript and/or test scores)

Name of Applicant _____

TEST SCORES

A. SAT SCORES (Space is provided for multiple test dates)

Critical Reading _____ Math _____ Writing _____ Test Date _____

Critical Reading _____ Math _____ Writing _____ Test Date _____

Critical Reading _____ Math _____ Writing _____ Test Date _____

B. ACT SCORES

English _____ Math _____ Reading _____ Science _____ Composite _____ Test Date _____

English _____ Math _____ Reading _____ Science _____ Composite _____ Test Date _____

C. SAT II TEST SCORES (Home School)

_____ English _____ Math Level I _____ American History

_____ Biology

_____ Chemistry

_____ European History

_____ Physics

D. HIGH SCHOOL CHECKLIST (Check one):

_____ I have enclosed an official copy of the student's test scores and verify that the above information is correct.

_____ The applicant has requested that the testing agency forward a copy of his/her test scores.

E. NAME AND TITLE OF HIGH SCHOOL _____

SIGNATURE OF OFFICIAL _____
name title