2021 SCHOLARSHIP APPLICATION

AMERICAN TRAIN DISPATCHERS ASSOCIATION SCHOLARSHIP PROGRAM FOR CHILDREN AND GRANDCHILDREN OF ATDA MEMBERS AND RETIREES APPLICATION DEADLINE: May 10, 2021 AWARD DATE: June 30, 2021

APPLICANT PERSONAL INFORMATION (please print clearly)

STREET	CITY	STATE	ZII
HONE	Date of Birth		
ULL NAME OF PARENT	, GRANDPARENT OR GUARDIAN	J (ATDA MEMBER)	
	, 0	(11211112112211)	
By June 2021, 1 wil	have completed		
[] High School			
[] 1st year college			
[] 2 nd year college			
[] 3 rd year college			
[] 4 th year college			
In the fall of 2021, I	will attend:		
	or College		
[] Community or Jun	•,		
[] Community or Jun	ity		

Eligibility

- 1. Children or Grandchildren of ATDA members and retired members
- 2. Good standing ATDA membership of Parent, Grandparent or legal guardian
- 3. Attending, acceptance or applied for acceptance into an accredited college, university, community college, or technical or trade school at the time of the award.
- 4. Awards to be used for the 2021-2022 school year.
- 5. Applications and all supporting documents must be received by May 10, 2021 in order to be considered. MAIL EARLY!!!

Non Eligibility

Children or Grandchildren of promoted, managers, or those in Official positions are **NOT eligible** for an ATDA Scholarship.

Award Criteria

Awards will be based on academic achievement and potential, character, leadership, social awareness, career goals and financial need.

Application Instructions

- 1. Please type or print clearly.
- 2. All requirements must be met and all information must be completed in order for the application to be considered.
- 3. Enclose a copy of your school grade transcript from your last **completed** semester or quarter and must include: Your name on the transcript, the school's name on the transcript, and applicable dates on the transcript. (SAT and ACT scores are not required)
- 4. Attach an essay of between 250 500 words. **Highlight how the union and/or labor movement** has affected the lives of you and your family, and explain why you are deserving of a union scholarship; Otherwise your application may be denied. Additionally, describe your career goals, aspirations and social awareness. Applications without essays will not be considered. Do not send essays separately.
- 5. Review and complete the scholarship application checklist and certification.
- 6. You must mail or email the application to the address or email address shown at the end of the application form.
- 7. Retain a copy of the completed application and all supporting documents for your files. It is strongly recommended that you contact the National Office at (216) 251-7984 Ext. 1006 to verify receipt of your application.

Estimated Financial Need
List the total anticipated amount you will need for the year.
Include the cost of tuition and expenses such as books, transportation and housing.
Employment/Awards/Activities
Please provide information on any employment you have held. Attach additional sheets if needed.
Please provide information on any special honors or awards you have received.
Trease provide information on any special nonois of awards you have received.
Please provide information on extracurricular or outside activities (clubs, sports or volunteer work) in which you
have participated.

Essay

Attach an essay of between 250 - 500 words. **Highlight how the union and/or labor movement** has affected the lives of you and your family, and explain why you are deserving of a union scholarship; Otherwise your application may be denied. Additionally, describe your career goals, aspirations and social awareness. Applications without essays will not be considered. Do not send essays separately.



ATDA Membership Verification Form

Name of Scholarship		
Applicant:		
-	(Please type or print clearly)	
Union Member or Retired Member Verificat	ion:	
I,(Please print name of union member)	_, verify that I am a member or the ATDA and that I am the guardian of the above named	
Railroad where employed or retired from		
Office working in or worked in if retired		
Signature of Union Member or Retired ATDA	Member	
ATDA Union Representative		
Print the Name of Union Representative and ATDA Position		rtime Phone Number
Name of System Committee if not a National C	MC and	

Applications without this completed form will not be considered.



Certification

I, the undersigned, certify that all of the information I have included in and with my application is true. I understand that if I am selected for an award, I may be required to submit further proof of my union membership or my relationship to a union member and of my acceptance to or enrollment in an accredited college, community college, university or recognized trade school. Further, I understand that official verification will be required of my attained grades and test scores. I agree that if I am selected for an award, my name, photograph, and/or essay may be used for publicity purposes with no additional compensation by the sponsors of this scholarship program. I also certify that I have read and understand the information above.

Signature
Date
CHECKLIST:
[] Complete all sections of this application
[] Copy of most recent completed school grade transcript in accordance instruction #3 on page 2 of this application. (SAT or ACT scores are optional)
[] Essay: The essay must be sent with the application in order to be considered
[] Membership verification form. Verification form must be sent with the application in order to be considered
[] Review and sign the application
[] Retain a copy of the completed application and all supporting documents for your records

APPLICATIONS MUST BE RECEIVED BY May 10, 2021

Mail to:

ATDA SCHOLARSHIP FUND c/o Secretary-Treasurer Ed Dowell 4239 West 150th Street Cleveland, Ohio 44135

Or email to:

ATDA.scholarship.2021@atda.org