

**MARTIN DUFFY
ADULT LEARNER
SCHOLARSHIP AWARD**

AWARD:

\$500 TUITION SCHOLARSHIP FOR USE AT ANY ACCREDITED UNIVERSITY, COLLEGE OR VOCATIONAL SCHOOL. TWO SCHOLARSHIPS ARE AWARDED EACH YEAR.

Winners to be selected by Lot

No academic performance standards or records required for eligibility.
Awards must be used within one year of receipt of notification letter.
Submit only one application per person. Duplicate entries will be disqualified.

QUALIFICATIONS:

Applicant must be a member in good standing of a Minnesota AFL-CIO local union; or

An AFL-CIO member on lay-off status who has a valid withdrawal card, has recall rights and was in good standing for six months prior to lay-off; or

A retired or disabled AFL-CIO member who was in good standing in his or her Local Union at the time of retirement or disablement.

REQUIRED APPLICATION PROCEDURE:

1. Obtain an application form from your Local Union.
2. Complete application form.
3. Obtain Local Union signature and certification. (If you mail the application to your Local Union, they will approve and then forward it to Labor Education Service at the University of Minnesota.)
4. Mail completed application form to Labor Education Service, University of Minnesota, 321 - 19th Avenue S. #3-300, Minneapolis, MN 55455. Phone: 612/624-5020.
5. The application must be postmarked no later than June 17th of the current year.

**MARTIN DUFFY ADULT LEARNER SCHOLARSHIP
APPLICATION FORM**

Name: _____

Home Address:

Home Phone No.: _____

Work Phone No.: _____

Place of Employment

I am currently:

_____ an AFL-CIO member in good standing

_____ an AFL-CIO member on lay-off status who has a valid withdrawal card, has recall rights and was in good standing for six months prior to lay-off

_____ a retired or disabled AFL-CIO member who was in good standing in my Local Union at the time of retirement or disablement

Please indicate how and where you would plan to use this scholarship. List intended post-secondary institution and your educational goals.

To be Completed by Officer (or Steward) From Your Local:

I certify that _____ is currently employed by _____
Applicant

and is a member in good standing of _____
Union
Local No _____ .

Date _____

Signature _____
Local Union Secretary-Treasurer or President