

2023 Laborers' International Union Education and Events Fund Scholarship

Laborers'
International
Union of
North America

LIUNA! LOCAL
368
Feel the Power



The Laborers' International Union Education and Events Fund will offer at least five (5) \$4,000.00 scholarships to encourage continuing education and learning to those who attend or are enrolled to attend an accredited 2-year or 4-year college or technical school in Hawai'i or the U.S. Mainland. All scholarships are awarded in July of 2023 and additional scholarships may be awarded and based on merit.

To assure that the most deserving Hawai'i applicants receive continuing education support from this scholarship, the identity and information provided about individual candidates is confidential during the judging process.

Eligibility Criteria:

1. A local 368 member in good standing, their spouse, and their children/dependents.
 - For children/dependents, at least one parent/legal guardian must be a Hawai'i resident and a Local 368 member in good standing.
2. The applicant must be graduating or graduated from a Hawai'i public or private high school and/or is an undergraduate attending an accredited college or technical school in Hawai'i or the U.S. Mainland.

Selection Criteria:

Academics, financial need, community involvement, special awards, and honors including athletic achievement and other evidence of personal motivation and eagerness to learn are among the criteria for selection.

Instructions to Applicant:

If all items listed below are not received completed in its entirety by the April 28, 2023 (postmarked) deadline, your application will be denied.

1. Completed Candidate Application: Part 1 - 5, Candidate References Form, and Short Essay
2. Official Transcript: High School or last College term
3. College Acceptance Letter (*Applicable to High School graduates only*)
4. FAFSA Student Aid Report: Download applications at <https://studentaid.gov/>
5. Two Confidential letter of Recommendation only from persons listed on your References Form. Complete the top portion and have the reference complete the bottom portion. Reference will mail forms directly to the LIUEEF Scholarship committee, do not submit them with your application.

Please note: no materials submitted will be returned to you

Mail: Attention - LIUEEF Scholarship Committee 1617 Palama Street Honolulu HI 96817
Contact: Richelle Puahala **Phone:** (808) 841-5877 or 1-800-372-4077 **Fax:** (808) 847-7829

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CANDIDATE APPLICATION FORM - Part 1 of 5

Applicant Number _____ (for committee use only)

(PLEASE TYPE OR PRINT LEGIBLY – do not leave blank spaces)

First Name: _____ Middle Name: _____

Last Name: _____

Nickname (if applicable): _____

Address: _____ Apt No: _____

City: _____ State: _____ Zip Code: _____

Email Address: _____ Sex: Male Female

Telephone: _____ Date of Birth: _____ Place of Birth: _____

UNION RELATIONSHIP: Member (skip to B.) Spouse (skip to B.) Dependent (complete A. and B.)

A. PARENT'S/LEGAL GUARDIAN'S INFORMATION

Father's Full Name: _____

Address (if different from above): _____

Mother's Full Name: _____

Address (if different from above): _____

Parent's Present Marital Status: Married Widowed Divorced Separated

Legal Guardian's Full Name (if other than parent): _____

Address (if different from above): _____

B. WORK EXPERIENCE (list most recent job at the top)

Company	Job Title	Hours Worked Weekly	Duties
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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CANDIDATE APPLICATION FORM - Part 2 of 5

Applicant Name: _____

APPLICANT'S PERSONAL FAMILY INFORMATION

(All information provided is confidential)

A. IF APPLICANT IS THE LOCAL 368 MEMBER – (complete below and skip to D.)

Employer: _____ Occupation: _____

B. IF APPLICANT IS THE SPOUSE OF THE LOCAL 368 MEMBER – (complete below and skip to D.)

Name of spouse who is a Local 368 member: _____

If working, name Spouse's current Employer: _____

C. IF APPLICANT IS THE DEPENDENT OF THE LOCAL 368 MEMBER – (complete below and D.)

Father's Information

Age: _____ Deceased

Union Relationship (if any): _____

Employer: _____ Occupation: _____

Mother's Information

Age: _____ Deceased

Union Relationship (if any): _____

Employer: _____ Occupation: _____

D. ALL OTHER CHILDREN IN YOUR FAMILY (regardless of age, whether still dependent or not)

First Name Only	Age	Occupation - (if student, name of school and grade level)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

E. BRIEFLY INDICATE UNUSUAL FINANCIAL OBLIGATIONS, IF ANY

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CANDIDATE APPLICATION FORM - Part 3 of 5

Applicant Name: _____

A. HIGH SCHOOL INFORMATION *(College student complete sections A. C. & D.)*

Name of High School: _____ Graduation Month/Year: _____

School's Address: _____

Telephone: _____

B. POST-HIGH SCHOOL HIGHER EDUCATION PLANS

List in the order of preference up the three post-high school institutions you would like to attend or have been accepted or applied to. **Please attach acceptance letter(s) to your application.**

Institute Name and Location (City, State)	Accepted or Application Pending
1. _____	_____
2. _____	_____
3. _____	_____

What field of study do you intend to pursue? _____

C. COLLEGE/TECHNICAL SCHOOL

Name of Institution: _____ Year first enrolled: _____

Expected Graduation Year: _____ Field of Study: _____

Address: _____ Telephone: _____

D. OTHER AID PROGRAMS

Have you applied or intend to apply for other financial aid or scholarship programs? Yes No

If yes, please list them below:

1. _____
2. _____
3. _____

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CANDIDATE APPLICATION FORM - Part 4 of 5

Applicant Name: _____

ACADEMIC ACHIEVEMENT

APPLICANT'S GPA: _____

Please summarize the academic achievements you have received while in high school/college. Feel free to use an extra sheet, if necessary.

COMMUNITY INVOLVEMENT

List any community activities. Limit your response to the space provided.

Community Activities	Year	Level of Involvement	Hours per week				
			1-5	6-10	11-15	16-20	20+

SPECIAL RECOGNITION, AWARDS, & HONORS

List commendations not previously listed. Limit your response to the space provided.

Commendations	Year	Group or Activity

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CANDIDATE APPLICATION FORM - Part 5 of 5

Applicant Name: _____

ACTIVITIES, LEADERSHIP POSITIONS, ATHLETICS

List student activities (or work activities for member and/or spouse applicants) in which you have participated in and the approximate year(s). In addition, list leadership positions held, accomplishments, and the appropriate year. Limit your response to the space provided.

Student/Work Activities	Leadership Position/Accomplishment	Year
Example: Student Council	President	2017

SHORT ESSAY

Begin your essay by briefly explaining how you intend to utilize the scholarship funds towards furthering your education should you be the successful candidate. Continue your essay by answering the following question and answer it as completely as possible. Essay must be typed, approximately 400 words, double-spaced.

Question: Describe your relationship with the union and the labor movement, how it has personally affected your life and explain why you believe you are a good choice for a union scholarship.

I hereby declare that I have read this application and that the information provided is correct and complete.

Applicant's Signature: _____ Date: _____

Parent/Guardian Name (print): _____
(For graduating high school applicants parent name and signature required)

Parent/Guardian Signature: _____ Date: _____

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CANDIDATE REFERENCES FORM - Part 1 of 1

Applicant Name: _____

Please give the names, addresses, and phone numbers of two persons who have known you long enough to form a judgment of your personal qualities, achievements, and academic abilities. Have each reference submit the CONFIDENTIAL LETTER OF RECOMMENDATION form and a minimum one-page recommendation letter on your behalf no later than the deadline of **April 28, 2023** (postmarked).

The Confidential Letter of Recommendation forms and one-page recommendation letters must be mailed directly to the Laborers' Union Education and Events Fund (LIUEEF) Scholarship Committee at 1617 Palama Street Honolulu HI 96817.

- For current high school students only, at least one reference must be a staff member, counselor, or an instructor at your school.
- It is the applicant's responsibility to ensure that the scholarship committee receives their Letters of Recommendation on or before the deadline.
- **Do not submit the confidential letter of recommendation yourself.**

IMPORTANT: The two references you chose to list below must be the same references who submit the confidential letter of recommendation form and one-page recommendation letter.

REFERENCE #1

Name: _____ Occupation: _____

Address: _____

Telephone: _____ Relationship to Applicant: _____

REFERENCE #2

Name: _____ Occupation: _____

Address: _____

Telephone: _____ Relationship to Applicant: _____

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CONFIDENTIAL LETTER OF RECOMMENDATION – REFERENCE #1

Name of Local 368 Member: _____

Applicant's Name: _____

First Name

Last Name

Middle Initial

High School: _____ Graduation Month/Year: _____

University/Technical School: _____ Graduation Month/Year: _____

----- Applicant completes the Top portion | Reference completes the Bottom portion -----

Important - Do not give to applicant to submit

Mail directly to - Attn: LIUEEF Scholarship Committee 1617 Palama Street Honolulu HI 96817

References' Name: _____

First Name

Last Name

Middle Initial

Title: _____ Occupation: _____

Address: _____

Telephone: _____ Relationship to Applicant: _____

This applicant is applying for one of 5 (five) \$4,000 scholarships to support continued education at an accredited 2-year or 4-year college or technical school.

Selection criteria include academic achievements, financial need, community involvement, special awards, and honors including athletic pursuits and other evidence of personal motivation and eagerness to learn.

Please describe your relationship to the applicant and your assessment of both the applicant's attributes and areas that need attention.

This statement is confidential and will not be released to the applicant or any other parties other than the Scholarship Selection Committee. Whenever possible, recommendation letters should be typed on an official letterhead.

Please attach this form to your typed reference letter and mail directly to our LIUEEF Scholarship Committee at the above address. Deadline is April 28, 2023 (postmarked).

Signature: _____ Date _____

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CONFIDENTIAL LETTER OF RECOMMENDATION – REFERENCE #2

Name of Local 368 Member: _____

Applicant's Name: _____
First Name Last Name Middle Initial

High School: _____ Graduation Month/Year: _____

University/Technical School: _____ Graduation Month/Year: _____

----- Applicant completes the Top portion | Reference completes the Bottom portion -----

Important - Do not give to applicant to submit

Mail directly to - Attn: LIUEEF Scholarship Committee 1617 Palama Street Honolulu HI 96817

References' Name: _____
First Name Last Name Middle Initial

Title: _____ Occupation: _____

Address: _____

Telephone: _____ Relationship to Applicant: _____

This applicant is applying for one of 5 (five) \$4,000 scholarships to support continued education at an accredited 2-year or 4-year college or technical school.

Selection criteria include academic achievements, financial need, community involvement, special awards, and honors including athletic pursuits, and other evidence of personal motivation and eagerness to learn.

Please describe your relationship to the applicant and your assessment of both the applicant's attributes and areas that need attention.

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Please attach this form to your typed reference letter and mail directly to our LIUEEF Scholarship Committee at the above address. Deadline is April 28, 2023 (postmarked).

Signature: _____ Date _____