



TEAMSTERS

TRUCK DRIVERS & HELPERS LOCAL 728



Affiliated with the International Brotherhood of Teamsters and Joint Council 75
2540 LAKEWOOD AVENUE, SW • ATLANTA, GA 30315-6308

Wes Turner, Secretary-Treasurer
Alauna Freeman, Recording Secretary
Quentin Bighon, Trustee

MATT HIGDON, PRESIDENT

February 6, 2023

Vincent Thrift, Vice President
Wayne Brown, Trustee
Jeptha Preston, Trustee

TEAMSTERS LOCAL 728

SCHOLARSHIP FUND, INC.

OBJECTIVE

The Teamsters Local 728, Scholarship Fund, Inc. has been established by the Teamsters Local 728 for the betterment of our communities. We as an organization believe that higher education is essential not only to the individual, but also to the welfare and future of our country which leads to better leadership, higher ideals, a fuller life, and a deeper appreciation of social responsibility. Today's young adults need the opportunity to become better educated in order to face the challenges as our leaders of tomorrow.

Eligibility

Applicants must be high school graduating seniors or students who plan to enroll in an undergraduate course of study at an accredited two (2) or four (4) year college/university or any academic/trade institute:

- a. Acknowledge acceptance to a college, university, or institute.
- b. Submit SAT or ACT scores
- c. Submit a 500-word essay on labor unions in America.
- d. Be a son, daughter, or financial dependent of a current Local 728 member.

Scholarships will be awarded based on the amount the "Fund" receives through donations. All applicants who comply with and submit the information under "ELIGIBILITY" will be considered by the Local 728 Teamster Education Selection Committee (TESC).

APPLICATION PROCEDURES

Applications must be completed and returned to the Local Union prior to April 30th of each calendar year. Applications not received by the above date will not be processed. Applicants are responsible for gathering and submitting all necessary information. Applications are evaluated exclusively on the information supplied; therefore, it is important to answer all questions as completely as possible. All information received is considered confidential and becomes the property of TESC.

SELECTION OF RECIPIENTS

Scholarship recipients will be selected solely by the TESC. The TESC will consist of the Teamsters Local 728 Executive Board members, as well as 1 education professional and 1 member of the clergy. Recipients are selected without regard to race, color, creed, religion, gender, disability, or national origin. The selection of successful applicants, the monetary amount of awards, and the number of recipients are within the sole discretion of the TESC.

PAYMENT OF SCHOLARSHIPS

The TESC will notify the recipient(s) by mail at their application address.

Scholarship Funds will be paid to the college or institute only.

OBLIGATION

Recipients have no obligation to Teamsters Local 728 or the Teamsters Local 728 Scholarship Fund, Inc., they are merely required to supply the fund with all pertinent information in support of their application.

REVISIONS

The Teamsters Local 728 Scholarship fund, Inc. reserves the right to review the conditions and procedures of the program and to make changes at anytime, including termination of the program.

Teamsters

"Helping to Educate Our Young Adults."

ADDITIONAL INFORMATION

Application Postmark deadline is **May 31, 2023**.

Questions regarding the scholarship program should be addressed to:

TEAMSTERS LOCAL 728 SCHOLARSHIP FUND, INC.

2540 LAKEWOOD AVE. SW

ATLANTA, GA 30315

(404) 622-0521

TEAMSTERS LOCAL 728 SCHOLARSHIP FUND, INC.



**Type or Print All Information
Except for Signatures**
If space provided in a section proves inadequate,
information may be continued on additional sheets
of paper and attached to the application.
Application postmark deadline - May 31st

APPLICANT DATA

NAME Last _____ First _____ Middle Init _____

PERMANENT HOME MAILING ADDRESS Number _____ Street _____ Apartment # _____

City _____ State _____ Zip Code _____

DATE OF BIRTH Month _____ Day _____ Year _____ Phone No. (____) _____

Email _____ Social Security Number _____

APPLICANT'S PARENT OR GUARDIAN INFORMATION

NAME Last _____ First _____ Middle Init _____

Employer _____ City _____ State _____

Classification Job Title _____

Work Phone (____) _____ Social Security Number _____

Relationship to Applicant _____

Applicant is a dependent of Teamster 728 Yes No

HIGH SCHOOL DATA

SCHOOL NAME _____ Graduation Date: Month _____ Year _____

PRINCIPAL _____ Phone No. (____) _____

ADDRESS Street _____ City _____ State _____ Zip _____

(Name of School you plan to attend. (If unknown, please list in order of preference the schools to which applications for admission have been sent.)

SCHOOL DATA

City _____ State _____

4 yr. College or University 2 yr. Community or Junior College Other, explain _____

Major course of study _____ Anticipated date of graduation _____ Month _____ Year _____

Student will live on campus live off campus commute from home

WORK EXPERIENCE Describe your work experience during the past four years. Indicate dates of employment in each job and approximate numbers of hours worked each week. List amounts earned at each job.

Company / Position	DATES		Hours Per Week	Amount Earned
	From Mo./Yr.	To Mo./Yr.		

ACTIVITIES AWARDS AND HONORS List all school activities in which you have participated during the past four years (e.g., student government, music, sports, etc.) List all school activities in which you have participated without pay during the past four years (e.g., Boy/Girl Scouts, hospital volunteer, Special Olympics). Indicate all special awards, honors and offices held.

Activity	No of Yrs Partic.	Special Awards, Honors	Offices Held	Activity	No of Yrs Partic.	Special Awards, Honors	Offices Held

GOALS AND ASPIRATIONS Make a statement of your plans as they relate to your educational and career objectives and future goals.

APPLICANT APPRAISAL (REQUIRED)

This is to be completed by a high school counselor or advisor, an instructor, or a supervisor who knows you well. You have been asked to provide information in support of this scholarship application. Please give immediate and serious attention to the following statements. When complete, please return to applicant; or photocopy this section and return to applicant in a sealed envelope.

The applicant's choice of an education program is	<input type="checkbox"/> extremely appropriate	<input type="checkbox"/> very appropriate	<input type="checkbox"/> moderately appropriate	<input type="checkbox"/> inappropriate
The applicant's achievements reflect his/her ability	<input type="checkbox"/> extremely well	<input type="checkbox"/> very well	<input type="checkbox"/> moderately well	<input type="checkbox"/> not well
The applicant's ability to set realistic and attainable goals is	<input type="checkbox"/> excellent	<input type="checkbox"/> good	<input type="checkbox"/> fair	<input type="checkbox"/> poor
The quality of the applicant's commitment to school and community is	<input type="checkbox"/> excellent	<input type="checkbox"/> good	<input type="checkbox"/> fair	<input type="checkbox"/> poor
The applicant is able to seek, find and use learning resources	<input type="checkbox"/> extremely well	<input type="checkbox"/> very well	<input type="checkbox"/> moderately well	<input type="checkbox"/> not well
The applicant demonstrates curiosity and initiative	<input type="checkbox"/> extremely well	<input type="checkbox"/> very well	<input type="checkbox"/> moderately well	<input type="checkbox"/> not well
The applicant demonstrates good problem-solving skills, follows through, and completes tasks	<input type="checkbox"/> extremely well	<input type="checkbox"/> very well	<input type="checkbox"/> moderately well	<input type="checkbox"/> not well
The applicant's respect for self and others is	<input type="checkbox"/> excellent	<input type="checkbox"/> good	<input type="checkbox"/> fair	<input type="checkbox"/> poor

Comments: _____

Appraiser's Name _____ Title _____ Phone No. (_____) _____
 Signature _____ Date _____
 Appraiser's Business Address Name _____ City _____ State _____ Zip _____

TRANSCRIPT INFORMATION Students must include all transcripts of grades.
 Applicant ranks _____ in a class of _____ Cumulative grade point average _____ / 4.0 scale.
 PSAT Verbal _____ Math _____ SAT Verbal _____ Math _____ ACT English _____ Math _____
 School Official's Signature _____ Date _____ Time _____ Phone No. (_____) _____
 School Official's Address Street _____ City _____ State _____ Zip _____

OTHER AWARDS Please list below the name and the amount of any grants or scholarships you have been awarded for the school year.

OTHER AWARDS	AMOUNT	GRANTED	PENDING
_____	_____	_____	_____
_____	_____	_____	_____

APPLICATION CHECKLIST The application for a scholarship becomes complete and valid only when you have returned all the materials as outlined under "ELIGIBILITY."
TEAMSTERS LOCAL UNION NO. 728
 2540 LAKEWOOD AVENUE, SW
 ATLANTA, GA 30315
 The student is responsible for submitting all materials to TESC on time.
 Postmark Deadline - May 31st

CERTIFICATION In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. If requested, I agree to give proof of information I have given on this form, including a copy of my U.S. Income Tax Return. Falsification of information may result in termination of any scholarship granted. The application becomes the property of TESC.
 Applicant's Signature _____ Date _____