



# LABORERS' LOCAL 225

8270 South Archer Ave, Willow Springs, IL 60480  
(708) 467-0600 [www.laborers225.org](http://www.laborers225.org)

## 2022 Continuing Education Scholarship

### Eligibility

Each candidate must be:

1. A member in good standing of LiUNA Local 225, for a minimum of two years at the time of application, or a legal spouse, child, or ward of a member in good standing of LiUNA Local 225.
2. Currently enrolled in a degree program at a community college or a 4-year accredited college or university.
3. Children and spouses of LiUNA Local 225's scholarship committee are ineligible for this program.

### Entry Requirements

The following information is required:

1. A completed application.
2. One, or more, letters of recommendation completed by a school faculty member, employer, or an adult not related to the student.
3. An official transcript of all current school records.

### Awards

1. Five, \$1,000 scholarships are available (subject to change).
2. LiUNA Local 225 will present the scholarship funds directly to the recipient, with the check payable to the college or university.
3. The scholarship funds are to be used only for tuition, fees, and books.
4. Only one scholarship can be awarded to a candidate.
5. Award recipients will be notified by U.S. Mail. The scholarship awards will be presented at an awards ceremony in June. Time and date TBD. Award recipient and LiUNA Local 225 member must attend.

### Judging

1. Sole authority for granting the scholarship awards resides with LiUNA Local 225 scholarship committee. The award recipients are selected on the following criteria:
  - a. Academic performance.
  - b. Community service.
  - c. Employment experiences.
  - d. Personal references.

### Deadline

Each entry, including all required information, must be hand delivered during normal business hours, or sent by certified U.S. Mail by March 4, 2022. Submit application to:

LiUNA Local 225  
Scholarship Program  
8270 S. Archer Ave.  
Willow Springs, IL 60480

Laborers'  
International  
Union of  
North America

**LiUNA!**

*Feel the Power*

# Application for LiUNA Local 225's 2022 Continuing Education Scholarship

## Directions:

- All sections must be completed. Use "N/A" if question does not apply.
- Application must be postmarked, or hand delivered, no later than **March 4, 2022**.
- Appearance and completeness will be considered during evaluation.

## Personal Information:

Name: \_\_\_\_\_  
First Middle Last

Home Address: \_\_\_\_\_  
Number & Street City State Zip

Telephone: (\_\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Check only one: ☐ The applicant is a member in good standing of LiUNA Local 225.  
☐ The applicant is a spouse of a member of LiUNA Local 225.  
☐ The applicant is a child or ward of a member of LiUNA Local 225.

I, \_\_\_\_\_ (Member's Name) affirm that the applicant  
listed above is my legal spouse or child. \_\_\_\_\_  
Member's Signature

## Scholastic Information:

College/University currently enrolled at: \_\_\_\_\_

\_\_\_\_\_  
School Address City State Zip

Area of Study/College Major: \_\_\_\_\_

Expected Date of Graduation: \_\_\_\_\_ Current GPA: \_\_\_\_\_

Scholastic Awards or Honors: \_\_\_\_\_

### **Community Activities:**

List the community activities and dates of participation:

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### **Employment Information:**

Directions: List below employment, full or part-time, and briefly explain duties and responsibilities. List your most recent job first.

1. Company name and type of business: \_\_\_\_\_

Address: \_\_\_\_\_

Employed from: \_\_\_\_\_ to: \_\_\_\_\_ Hours per week \_\_\_\_\_

Supervisor's name & phone: \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_

Duties/Responsibilities: \_\_\_\_\_

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2. Company name and type of business: \_\_\_\_\_

Address: \_\_\_\_\_

Employed from: \_\_\_\_\_ to: \_\_\_\_\_ Hours per week \_\_\_\_\_

Supervisor's name & phone: \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_

Duties/Responsibilities: \_\_\_\_\_

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3. Company name and type of business: \_\_\_\_\_

Address: \_\_\_\_\_

Employed from: \_\_\_\_\_ to: \_\_\_\_\_ Hours per week \_\_\_\_\_

Supervisor's name & phone: \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_

Duties/Responsibilities: \_\_\_\_\_

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