

Academic Verification

Student Name: _____
(Last) (First) (MI)

Address: _____
(Number & Street)

(City) (State) (Zip)

High School Name: _____

Address: _____
(Name & Street)

(City) (State) (Zip)

Applicant will attend: _____
(college, university, technical school)

Combined SAT Scores: _____ Class Rank: _____

Date: _____
Guidance Counselor

[School Seal]

Please Attach Official Student Transcript

Student: Return your application, which includes Verification of Union Membership; the Academic Verification form; an official High School Transcript; and your Essay to the Scholarship Committee Chairman at the address below. Applications must be postmarked no later than May 9, 2010.

Scholarship Committee
Burlington County Central Labor Council, AFL-CIO
c/o Joseph J. Dill, Jr.
82 Vandevere Lane
Columbus, NJ 08022

Legibility is a Plus!