

2018 GEORGE C. SPRINGER SCHOLARSHIP PROGRAM

The George C Springer Scholarship is reserved for AFT Connecticut **members**. Candidates are selected based on academic promise and financial need, among other criteria. The applicant must be an AFT Connecticut member in good standing.

Applicant Name
Local Name and Number:
How long have you been a member?
Verification of Membership (form must be signed by an officer of the AFT Connecticut local)
Local Officer Signature
Local Officer Title
Applications postmarked no later than April 2, 2018 should be completed and returned to: AFT CONNECTICUT - SCHOLARSHIP PROGRAM, 35 Marshall Road, Rocky Hill, Connecticut 06067
All information requested must be provided, including financial statements that verify income . Incomplete applications will be returned and the applicant is responsible for making corrections and returning the application prior to the deadline.
BEFORE MAILING YOUR APPLICATION Check to make sure the application is completely filled out. Be sure to have membership verified by a local officer. Sign the form certifying information provided is true and correct. Be sure to enclose copies of 1040 forms to verify household income. (Please redact social security numbers.) Be sure to include Personal Information summary, recommendation letters, essay, and any other information you believe will assist the committee's deliberations.

George C. Springer Scholarship - (For AFT Connecticut Members) **APPLICANT DATA (please print)**

Last/First/MI		
Street Address	City	StateZip Code
Telephone	Email	
Current Employment:		
include the area o supplies, etc., and for coursework.	f study you intend to pursue, to the college or university to wh	applying for this scholarship. Please he estimated costs for tuition, books, nich you've applied or been accepted
-	r, please tell us about your invo nd/or any awards or honors yo	olvement in community, volunteer, or underlying the have received.
 On separate sheet following: 	, please write an essay of no m	nore than 350 words answering the
"How has the union I peers?"	membership made your family exper	ience different from your non-union family
	I hereby certify that all info	ormation provided in this application is true and correct.
	Signature of Applicant	Date

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