



AFSCME LOCAL #2322 SCHOLARSHIP PROGRAM APPLICATION FORM

Please complete and return to:
Judy Byers
Morgan Hall #333
California University of PA
Box #60, 250 University Avenue
California, PA 15419

Due Date: March 31, 2020

STUDENT INFORMATION:

Name: _____
Student ID#: _____
Address: _____
City, State, Zip Code: _____
Daytime telephone number: _____

Year which you will be entering (Please check one):

- FRESHMAN
- SOPHOMORE
- JUNIOR
- SENIOR

Expected Graduation Date (Month/Year): _____

Have you previously applied: _____

Qualified students must have distinguished themselves with a 2.0 or higher GPA.

SPONSOR INFORMATION:

(Must be a member in good standing when the award is made)

Name: _____

Relation to student: _____

- Scholarship Application must be received by March 31, 2020
- Please submit a copy of the current fee remission form with application

****By submitting this application, it gives the AFSCME
Local #2322 Scholarship Committee permission to request your
information regarding grade point average and financial need information.****

Signature: _____ Date: _____