MARTIN KITTLE SCHOLARSHIP 2024-2025

THE PROGRAM

The Scholarship Awards Program is an undertaking of the contributing Employers to this Fund, who are signed with District Council #9, Local 806—IUPAT, created the awards program to encourage and assist the children of journeymen members in their employ to achieve a higher education.

QUALIFICATIONS

To qualify for the competition the applicant must:

- Be the son or daughter whose parent has been a member in good standing with District Council #9, for three continuous years prior to applying for the award and is a member of Local 806, and has earned eligibility working for an employer who is a signatory with District Council #9, Local 806.
- Be a high school senior who will be graduating during the current academic year and will enter the first year of college in September.
- Has maintained at least a B average in high school.
- Be accepted in any accredited FOUR-YEAR university.

HOW WINNERS ARE DETERMINED

The Scholarship Advisory Committee will evaluate applications by the use of, but not limited to, such information as the High School academic record, extracurricular activities, personal interview, and test scores.

TO MAINTAIN THE SCHOLARSHIP AWARD

A Scholarship Award winner who makes satisfactory progress towards his/her degree, meeting the standards set by the college Scholarship Committee, <u>may retain the scholarship throughout the four years</u> of college attendance or until the requirements for a Bachelor's degree are completed, whichever is earlier. <u>It is mandatory, however, that the student qualify each year by furnishing the Scholarship Committee with the college transcript.</u>

If a recipient's studies are interrupted by illness, accident, change in college enrollment, or some other extenuating circumstance, such information must be reported promptly to the Painting Industry Scholarship Committee. Requests for the recipient's scholarship to be held in abeyance will be considered by the Scholarship Committee.

HOW TO APPLY

To be considered for a Scholarship Award you must:

- Fill out the enclosed application that follows and return promptly to the Painting Industry Scholarship Committee.
- Give the completed application to your principal or Guidance Counselor and ask him or her to sign it, enter your junior rank in class, S.A.T. scores, and enclose a transcript of your school record.
- The school seal must be affixed to Page Three.
- E-mail completed application **ASAP to:**

bruinsky@masterpaintersny.com

or mail to:

SCHOLARSHIP AWARDS PROGRAM 370 Seventh Avenue, Suite 418 New York, NY 10001

Remember, it is your responsibility to apply for and gain admission to the university of your choice. To qualify for a scholarship, you must have been admitted to a four-year college or university.

Please keep these first two pages for your future reference, and return to us the enclosed application with all the required information.

PAGE ONE

APPLICATION—SCHOLARSHIP AWARDS

TYPE OR PRINT CLEARLY ALL INFORMATION:

			S	EX
NAME		_		
LAST	FIRST	MIDDLE	M	F
MAILING ADDRESS				
DATE OF BIRTH / M D	YR Social Sec	curity #	Telephone #	
HIGH SCHOOL: NAME	ADDRI	ESS		
PRINCIPAL'S NAME		_ CITY		
IN WHAT STUDENT ACTIV	VITIES DID YOU	PARTICIPAT	E?	
LIST OFFICES HELD OR H	ONORS RECEIVI	ED IN THESE	ACTIVITII	ES:
COLLEGE OF ADMISSION		DATE ACC	CEPTED	
ADDRESS				
STATE		ZIP	CODE	
YOUR INTENDED MAJOR:				
LIST FINANCIAL ASSISTANCE	YOU HAVE BEEN	AWARDED:		
TAP \$ FASFA	\$	STATE REGE	NTS \$	
LIST ANY OTHER FINANCIAL	ASSISTANCE YOU	HAVE APPLIEI	O FOR:	

APPLICATION: PAGE TWO

PARENT INFORMATION

Parent must be in good standing as a journeyman member of the International Union of Painters and Allied Trades, District Council #9, of New York City. Complete required information below:

PARENT'S NAME	ADDRESS		
CITY	STATE	ZIP CODE	
LOCAL #	INSURANCE	#	
	SOCIAL SECURITY #		
	EARNINGS -	2023	
PRESENT EMPLOYER'S NAME _			
ADDRESS _			
TELEHPON	TE#		
S.A.T. taken on	YEAR		
I authorize the use of my Scholastic Against authorize my high school to complete			
Applicant's Signature	Parent's S	ignature (if applicant under 18)	

APPLICATION: PAGE THREE

HIGH SCHOOL VERIFICATION

This section to be completed by princip	al or guidanc	e counselor.	
Is the student a senior in high school?	YES □	NO □	
Exact rank in class in Junior year			
Junior year class size			
S.A.T. score			
OTHER COMMENTS			
Signature of Principal or Guidance Counselor		DATE	

SCHOOL SEAL OR STAMP:

Please attach a transcript of the school record.

Application must be returned by the school signatory by July 31, 2024

EMAIL TO: <u>bruinsky@masterpaintersny.com</u>

OR MAIL TO: SCHOLARSHIP AWARDS PROGRAM

370 Seventh Avenue, Suite 418

New York, NY 10001

APPLICATION: PAGE FOUR In not less than 150 words write an essay on "Why I want to go to college."