



Application for 2018  
**LOCAL 399**  
**ANNE GINDORF SCHOLARSHIP AWARD**  
(*\$2500 per year*)

Please Print or Type

Name of Applicant: \_\_\_\_\_  
(First Name) (Middle Name) (Last Name)

Address: \_\_\_\_\_  
(Street) (City/State) (Zip Code)

Home Phone Number: (\_\_\_\_) \_\_\_\_\_ Male Female

Name of Applicant's Parent who is a Local 399 Union Member: \_\_\_\_\_

Address of Member: \_\_\_\_\_  
(Street) (City/State) (Zip Code)

Union Register Number: \_\_\_\_\_ Union Member's Social Security Number: XXX-XX-\_\_\_\_\_  
*Last 4 Digits Only*

Union Members Employer: \_\_\_\_\_

Name of High School which Applicant Attends: \_\_\_\_\_

High School Address: \_\_\_\_\_  
(Street) (City/State) (Zip Code)

Signature of High School Principal: \_\_\_\_\_ Date: \_\_\_\_\_

Date of Applicant Graduation: \_\_\_\_\_

4 Year University or College which Applicant will be attending:

Applications must be submitted to the Local 399 office – Attention: Scholarship Committee, 2260 S. Grove Street • Chicago, IL, 60616. Deadline for scholarship application is May 31, 2018.

\_\_\_\_\_  
*Signature of Applicant*