

# The Jonna Weed Memorial Scholarship Application

*Danny Ruerup, Chairman*  
*Jacob Howdeshell, Secretary-Treasurer*

2740 Davis Rd., Fairbanks, AK 99709  
(907) 456-4584 Phone (907) 452-6285 Fax




---

## Scholarship Application Information

### *Goal:*

The Alaska Laborers Local 942 Political and Education Committee scholarship program is designed to support and strengthen the commitment of Laborers Local 942 members and their families to excellence in education.

### *Eligibility Requirements:*

- Must be a member, or legal dependent of a member, in good standing of Laborers' Local 942 .
- Must be in the final year of high school and/or enrolled as a full time student in any 4 year undergraduate college degree.
- The only 2 year degree program that will be considered must be in Construction Management or Construction Technology.

### *Application Criteria:*

General scholarship criteria will be considered in making the selections and shall include

academic attainments/rank in class, character, anticipated field of study, extra-curricular accomplishments, and other criteria as may seem applicable to the scholarship program.

### *Deadlines:*

Applications for Fall semester must be submitted no later than **September 30th** each year. Spring semester applications must be submitted no later than **January 31st each year.**

### *Application Procedures:*

Please complete the enclosed application in full by typing or printing legibly.

Submit the following with the application:

1. Copy of latest transcript.
2. Copy of admission acceptance
3. Copy of registration receipt detailing costs. Costs of books purchased can be included.
4. One or two letters of recommendation.
5. Applicant's statement, minimum of 150 words, outlining academic goals and how the Union has been relevant to you and your family.

***Please Note:*** Failure to submit the application timely and/or include all of the above-requested information may result in rejection of the application from consideration.

***Send Applications To:*** Jonna Weed Scholarship, 2740 Davis Rd., Fairbanks, AK 99709

# The Jonna Weed Memorial Scholarship

2740 Davis Rd., Fairbanks, Alaska 99709

## Scholarship Application

Semester Applying For  Fall  Spring Year: \_\_\_\_\_

Name \_\_\_\_\_  
 Last First Middle or Initial

Address \_\_\_\_\_  
 Street or PO Box

Contact Info \_\_\_\_\_  
 City State Zip  
 ( ) ( )  
 Telephone Fax Email

Date of Birth and Marital Status \_\_\_\_\_  
 Date of Birth Marital Status

Number of Dependents \_\_\_\_\_  
 Number of Dependents

Name of Sponsoring Union \_\_\_\_\_  
 Member and Date He or \_\_\_\_\_  
 She Joined the Union \_\_\_\_\_  
 Last First Initial  
 Membership Date

Your Relationship to the \_\_\_\_\_  
 Union Member \_\_\_\_\_

Complete the remainder of this page only if you are a dependent:

Father/Legal Guardian's Name: \_\_\_\_\_

Employer and Occupation \_\_\_\_\_

Mother/Legal Guardian's Name \_\_\_\_\_

Employer and Occupation \_\_\_\_\_

Number and Ages of Siblings \_\_\_\_\_

I hereby certify that I provide in excess of 50% of the financial support of the applicant and that the applicant is my dependent for federal income tax purposes.

Signature: \_\_\_\_\_

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_  
 in the City/Borough of \_\_\_\_\_ in the State of \_\_\_\_\_

\_\_\_\_\_  
 Notary Public

# *The Jonna Weed Memorial Scholarship*

2740 Davis Rd., Fairbanks, Alaska 99709

---

## *Scholarship Application*

---

Name

Date

*Name and Address of College or University You Plan to Attend*

---

---

---

*Field of Study*

*Educational Background ( Include the name and dates of the high school(s) or its(their) equivalent that you attended, any previous college attendance and apprenticeship or training programs completed. List the name and location of the schools, the year graduated, degree(s) received, if applicable, and/or fields of study.)*

---

---

---

---

---

---

---

*List Extra-Curricular School and Community Activities*

---

---

---

*List Pertinent Honors and Awards You Have Received*

---

---

---

*The Jonna Weed Memorial Scholarship*  
 2740 Davis Rd., Fairbanks, Alaska 99709

---

*Scholarship Application*

---

Name

---

Date

*Brief Employment History (Start with most recent. List name of and contact information for the company, the dates employed, and your specific job duties, or attach a copy of your employment resume.)*

---

Employer Name

---

Address

---

Telephone/Contact Information

---

Job Duties

---

Employer Name

---

Address

---

Telephone/Contact Information

---

Job Duties

---

Employer Name

---

Address

---

Telephone/Contact Information

---

Job Duties

*Other Scholarships/Financial Aid Received (List names of the organization(s) or other responsible party(ies) and the amount(s) received* \_\_\_\_\_

---

*I certify that the information on and accompanying this scholarship application is true, complete and accurate. I authorize release of information needed to verify statements made in this application.*

*Signature* \_\_\_\_\_

*Date* \_\_\_\_\_