



APPLICATION

PLEASE PRINT OR TYPE:

Applicants Name: _____

Date: _____ Address: _____

Phone: _____ Email: _____

Name of High School: _____ Graduation Date: _____

Name of School where scholarship will be used: _____

Date of Enrollment: _____ Major/Profession you will be studying: _____

AFSCME COUNCIL 93 MEMBER RELATIONSHIP

Self Spouse Parent/Step Parent Grandparent Guardian Other

Local Number: _____ Employer: _____

Member Name: _____ Phone: _____

Email Address: _____

Please confirm your submission includes the following requirements:

- Completed application
- Completed typed essay (500-750 words) "Unions have been important to my family because..."
- Proof of enrollment to school listed above (acceptance letter, schedule, invoice)

Completed submissions including the three items listed above must be received via email: ksundeen@afscme93.org by June 30, 2026 for consideration.

*** Please note, essays will be scanned for use of AI technology ***