

Harriet Bouslog Labor Scholarship
SCHOLARSHIP APPLICATION

Name: _____

Address: _____

Telephone: _____ Social Security No.: _____

Father's Name: _____ Employer: _____

Mother's Name: _____ Employer: _____

High School: _____ Yr. of graduation: _____ Current GPA: _____

Awards and Citations: _____

Extracurricular Activities: _____

Career Goals: _____

Parents or Grandparents who are active or retired ILWU members:

Name: _____ Relationship: _____

Address: _____

ILWU Employer: _____

Dates of Employment: _____

Active: Yes No

Retired: Yes No

Have you applied for admission to the University of Hawaii as a full-time student?

Yes No

Which campus of the **University of Hawaii** do you plan to attend?

Manoa Hilo

Applicant's Signature

Date