2027-2028 Preliminary Application Form
Walter L. Mitchell Memorial Scholarship Awards

Be sure to fill out BOTH sides. **I hereby apply for a Walter L. Mitchell Memorial Scholarship Award. I agree to be bound by the rules of the Award Program and the decision of the selection committee.**

Name _____ **Date of Birth** _____

Mailing Address _____
Street

_____ , _____ , _____
City ***State*** ***Zip***

Last 4 of SSN _____ **Email address** _____

I am enrolled as a student at _____
Name of School

Located in _____ **Graduating** _____
City **State** **Date**

Name of Parent or Guardian _____

Member of Local No. _____ **ICWUC**

I plan to attend _____ **in 2027-2028**
Name of College, University or other institution

Location _____
City ***State***

I have taken SAT, ACT or equivalent exam on: _____
Name of Exam ***Date***

I will take SAT, ACT or equivalent exam on: _____
Name of Exam ***Date***

_____ _____
Date ***Signature of Applicant***

I hereby certify that _____ has been a member in good standing of

Name of Parent or Guardian of Applicant

Local No. _____, ICWUC for at least one year prior to March 5, 2027.

_____

Signature of Local Union President

_____

Signature of Local Union Secretary-Treasurer

Return to: International Chemical Workers Union Council/UFCW
1655 West Market Street, 6th Floor
Akron, OH 44313

Or via email to dburdette@icwuc.org or agrunder@icwuc.org

IMPORTANT: This form must be filled out completely and **postmarked or emailed NO LATER THAN March 5, 2027. Failure to receive your application by that date will result in IMMEDIATE DISQUALIFICATION.**