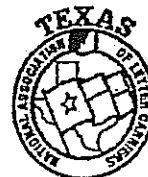




Texas State Association of Letter Carriers  
The Anne Jefferson / Doug Meador / T. T. Morris  
Memorial Scholarships Eligibility Criteria



1. The applicant must be the son, daughter, step-child or foster child with legal guardianship, or an active, retired or deceased Letter Carrier.
2. The applicant's parent, if living, must be an eligible voting member of the TSALC with at least one years membership prior to making application. If deceased, applicant's parent must have been an eligible voting member with at least one years membership prior to death.
3. The applicant must be a high school senior when making application and must submit the attached forms to the TSALC Vice-President / Director of Education at the address indicated on this letter. The application must be signed by the applicant, the applicant's eligible parent or step-parent and the Branch Secretary or Treasurer of the NALC.
4. All applicants must take the Scholastic Aptitude Test (SAT) OR the American College Test (ACT) with applicant being responsible for the required fees of above named tests. It is recommended that the applicant test at the earliest possible date.
5. Applicants are judged on the basis of their secondary scholastic records, personal qualifications and the results of their SAT / ACT. To be eligible for full consideration of the scholarship award, the following must be submitted:
  - a. The Anne Jefferson / Doug Meador / T. T. Morris Memorial Scholarships application
  - b. The TSALC Scholarship questionnaire
  - c. SAT OR ACT scores
  - d. Official certified school transcripts showing grade point average, rank in class and at least a portion of the grades for the senior year.

NOTE: You may also submit any reference letters from teachers, church leaders, employers, etc that may offer additional information for consideration. **The deadline for submitting this information is June 2, 2012**

6. Three (3) \$ 2,000 scholarships are awarded each year. The scholarships are good for one (1) year only. The winners will be announced at the State Convention in odd-numbered years and by other means in even-numbered years.
7. The Scholarship Committee will consist of the TSALC President, Vice-President / Director of Education, Director of Retirees and the TSALC Auxiliary President.
8. The Scholarship recipients may attend an accredited college of their choice. Proof of acceptance must be provided to the TSALC Secretary by **July 16, 2012** The award money is deposited with the college selected by the student to be credited to an account in their name to be drawn upon according to the rules and regulations as established by the college. The award may be used for all college fees including room and board.
9. If a Scholarship recipient decides not to attend college in the fall following graduation, the scholarship will be awarded to the first available alternate. If a recipient suffers a certified serious illness and is unable to attend as scheduled, the award will be held in abeyance for not more than one (1) year from the date originally scheduled.

Send all completed forms and other information to:

Sharon Rucker  
TSALC Secretary  
1216-B Winscott Rd.  
Benbrook, TX 76126

(817) 249-1409 (Home)  
(817) 244-4956 (Work)



**The Ann Jefferson / Doug Meador / T.T. Morris  
Memorial Scholarship Application**

Applicant's Name: \_\_\_\_\_  
(last) (first) (middle)

I am the: Son \_\_\_\_\_ Daughter \_\_\_\_\_ Step (son / daughter) \_\_\_\_\_ Foster (son / daughter) \_\_\_\_\_

of an eligible voting: Letter Carrier \_\_\_\_\_ retired Letter Carrier \_\_\_\_\_ deceased Letter Carrier \_\_\_\_\_

who is / was a member of Branch \_\_\_\_\_.

Home address: \_\_\_\_\_

City / State / Zip: \_\_\_\_\_ Phone # \_\_\_\_\_

High School now attending: \_\_\_\_\_

High School address: \_\_\_\_\_

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Social Security number

My parent is a Letter Carrier at: \_\_\_\_\_

Station address: \_\_\_\_\_

\_\_\_\_\_  
Signature of NALC Parent

\_\_\_\_\_  
Social Security number

I certify that the above parent is a member of Branch \_\_\_\_\_ and as of this date is a member in good standing of the Branch.

\_\_\_\_\_  
Signature of NALC Branch Secretary or Treasurer

\_\_\_\_\_  
Date

Is the other parent a member of an Auxiliary Branch? \_\_\_\_\_

If yes, Auxiliary Branch number: \_\_\_\_\_

I certify that \_\_\_\_\_ is a member in good standing of Auxiliary Branch \_\_\_\_\_.

\_\_\_\_\_  
Signature of Auxiliary Secretary or Treasurer

\_\_\_\_\_  
Date

All supporting documentation must be submitted along with this application as outlined in the rules.

# TSALC SCHOLARSHIP QUESTIONNAIRE

NOTE: The selection of scholarship recipients will be influenced by the completeness of your replies, neatness and legibility.  
Please type or print - using black ink.

## YOU - THE APPLICANT

Date of birth:

Age:

Male

or

Female

Legal name in full:

Home address:

City / State / Zip:

Phone:

Date of graduation:

## YOUR FAMILY

Father's full name:

Home address:

City / State / Zip

Phone:

If deceased, give year of death:

Occupation: (be specific about his position and what he does or did do)

Company name:

Mother's full name:

Home address:

City / State / Zip:

Phone:

If deceased, give year of death:

Occupation: (be specific about her position and what she does or did do)

Company name:

Number of brothers:	Ages:
Number of sisters:	Ages:

If someone other than your father or mother supports you, please complete the following:

Name:	
Address:	
City / State / Zip:	
Relationship to you:	Occupation:

**EDUCATION**

List all schools attended in the last four years, including summer or special courses, beginning with your most recent.

Name of School / Location	From - To	Courses taken

**SCHOOL ACTIVITIES**

List clubs, organizations and activities in which you participated at your school (such as yearbook, debate team, drama, foreign language clubs, student government, art)

Activity	From - To	Offices Held	Special awards or Honors

**SPORTS**

List sport(s) in which you participated.

Sport	From - To	Position	Special awards or Honors

**COMMUNITY ACTIVITIES**

List community activities in which you participated without pay (such as hospital volunteer work, church work, hot lines and outreach programs).

Type of work	Agency of Organization	From - To	Special Awards

**EMPLOYMENT**

List all jobs held in the last three or four years.

Position	Employer	From - To	# of hours per week

**CAREER GOALS**

Please answer the following questions as best as able. You will not be penalized if you are undecided, but please try to give an idea of what your college goals are.

What course of study (major) have you decided on? (You may indicate more than one or answer "undecided".)

Do you plan to go attend a graduate school or professional school after college? (Please give details if answering yes.)

Have you decided upon a future occupation? (Please specify if answering yes.)

**MISCELLANEOUS**

Which of your experiences, academic or other, has given you the greatest satisfaction? Why? (NOTE: Be concise with your answers. Limit yourself to the space provided.)

Please explain your opinion about organized Labor. Is it beneficial or not? Is it outdated? If Labor had never organized, what would it be like to work in America?

What books and articles have you read within the last six months?

School Assignments	Personal Reading

Which one made the most impact on you and why?