



BARNARD COLLEGE

UNITED AUTO WORKERS LOCAL 2110

2110/BC College Tuition Scholarship Application Form

INSTRUCTIONS

Please complete and submit the following information via mail, e-mail, fax or in person, along with an itemized tuition invoice; proof of birth, adoption or guardianship of dependent; proof of full-time undergraduate status of dependent at an accredited 4-year institution; and an essay written by the dependent (up to 500 words) expressing why they feel they should be issued the tuition scholarship to:

Local 2110/UAW
Barnard College/ Office of Human Resources
c/o Sharon T. Walls/ Purchasing Dept.
New York, NY 10027
e-mail: swalls@barnard.edu
fax: 212-280-2063

The deadline for submission is: July 1, 2017

Employee Information

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Title/Grade: \_\_\_\_\_ Department: \_\_\_\_\_

Work Phone: (\_\_\_\_) - \_\_\_\_\_ Home Phone: (\_\_\_\_) - \_\_\_\_\_

Home Address (Street): \_\_\_\_\_

(City, State, Zip code): \_\_\_\_\_

Email Address: \_\_\_\_\_ Work Fax: (\_\_\_\_) - \_\_\_\_\_

Date of Hire (mm/dd/yyyy): \_\_\_\_/\_\_\_\_/\_\_\_\_

Dependent Information

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Date of birth (mm/dd/yyyy): \_\_\_\_/\_\_\_\_/\_\_\_\_

Name of School: \_\_\_\_\_

Expected Date of Graduation: \_\_\_\_\_

Name of Degree Program: \_\_\_\_\_

Please be advised that in order to be considered for a scholarship:

- Dependent must be a full-time undergraduate student at time of distribution of scholarship.
• Dependent must be 26 or under as of December 31, 2017
• Excludes students who are matriculated at Barnard
• At time of submission employee must be a 2110 member employed by Barnard College as of January 1, 2017 and on the date of distribution of the funds.