APPLICATION FOR THE NABET-CWA LOCAL 53 CHARLES H. TANT MEMORIAL SCHOLARSHIP AWARD

APPLICANTS MUST BE STUDENTS IN A HIGH SCHOOL CLASS GRADUATING IN 2014.

PLEASE PRINT OR TYPE EVERTHING BUT THE SIGNATURE.

NAME:				
NAME:(LAST)	(FIRST)	(M)	DDLE)	
ADDRESS:(Street & Number)				
(Street & Number)	(Apt.)	(City & Zip	Code)	
PHONE:()	()	<u>SE2</u>	K: M/F	
(Residence)	(Business)			
SOCIAL SECURITY NUMBER:				
* * * * * * * * * * * * * * * * * * * *				
PARENT OF APPLICANT:				
(LAST)	(FIR	LST)	(MIDDLE)	
PARENTS OCCUPATION:EMPLOYI		EMPLOYED BY:	ED BY:	
		(CALL LETTERS/NA	ME OF STATION)	
PARENTS E-MAIL:				
* * * * * * * * * * * * * * * * * * * *				
DATE:				
Dirid		(Applicant's Signa	ture)	
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PLEASE RETURN THIS APPLICATION TO THE NABET-CWA LOCAL 53 OFFICE				
1918 WEST BURBANK BOULEVARD				
BURBANK, CALIFORNIA 91506				
NOT LATER THAN APRIL 11, 2014				
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