



Nettie Stone Johnson Scholarship

Labor & Education: Partners for the Future

Application Form

Personal Information

Name: _____
Last First Middle Initial

Address: _____
Street Apt# City State Zip Code

Phone(s): _____ Email: _____

School Information

School Attending: _____ Major: _____

Date of Acceptance: _____ Expected Graduation Date: _____ Anticipated # credits Fall ____ Spring ____

Union Information

Name of Union Member: _____ Phone Number: _____

Relationship of applicant to union member:

Applicant is The member Spouse Son/Daughter Grandchild

Name of Union/Local: _____

Union Contact: _____ Phone Number: _____

Ethnicity

Asian/ Pacific Islander American Indian/ Native American/Alaskan Native

Black/ African American Chicano/a or Latino/a Other: _____

Financial Need

List all scholarships, awards, grants or other sources of financial aid for the upcoming year. Include organization and amount.

Privacy release

If you are selected for a scholarship, do we have permission to release information? Yes No

Hometown newspaper(s): _____

Name(s) to be included in publication (parent/guardian, etc): _____

Application Packet

Along with this application form, I am submitting:

- My written statement
- Two letters of recommendation
- Required scholastic record(s)
- Union verification

Applicant Signature _____ **Date:** _____

Application packets must include all requested information and must be postmarked by May 1 for consideration.

Mail to:

The Nellie Stone Johnson
Scholarship Committee
P.O. Box 40309
Saint Paul, MN 55104

Phone: 651-738-1404
Toll Free: 1-866-738-5238