OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION

2020 - ROMEO CORBEIL/GILLES BEAUREGARD SCHOLARSHIP

"SUMMER CAMP"

- Twenty (20) scholarships will be awarded on the basis of at least one (1) per region.
- Applications are selected on a first come, first served basis.
- Applications are open to children (between ages 13 and 16 only) of OPEIU members in good standing
 or associate members, all of whom must meet the eligibility requirements and comply with the Rules and
 Regulations as established by the OPEIU Executive Board.
- Each scholarship has a total maximum value of \$2,000.00.

ELIGIBILITY:

An applicant must be the son, daughter, stepchild, legally adopted child, grandchild, niece, nephew or any other child that the member is responsible for caring for, including children of domestic partners (**between ages 13** and **16 only**) of an OPEIU member or associate member, in good standing.

<u>Each child can attend this camp once, in an effort to provide this rewarding experience to as many members of our OPEIU family as possible.</u>

PROCEDURES:

- Each applicant must file an official OPEIU scholarship application.
- Application forms must be endorsed by the Local Union President or Secretary-Treasurer
 attesting that a parent or guardian of an applicant is a member or an associate member in good standing
 up until date of endorsement such endorsement must be obtained BEFORE the application is submitted.

FORMS:

Application forms may be obtained:

- at your Local Union office
- at the Secretary-Treasurer's office of the International Union
- from our web site at <u>www.opeiu.org</u> once logged into the site, click on OPEIU Member Resources/OPEIU Membership Benefits.

APPLICATION:

All completed and signed applications must be received at the Secretary-Treasurer's office of the International Union, P.O. Box 1761 New York, NY 10113, no later than **April 30, 2020**.

TIME AND PLACE:

The camp will take place at the **University of Missouri Campus, Columbia, MO.** The dates are **July 19th through July 24th, 2020.**

SELECTION OF SCHOLARSHIP:

Winners will be selected and notified by email by **May 31st, 2020**.

OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION

2020 - ROMEO CORBEIL/GILLES BEAUREGARD SCHOLARSHIP "SUMMER CAMP"

APPLICATION FORM APPLICATION DEADLINE: April 30, 2020

Last First Middle Home Address:	Name of Applicant:			
Street Sex: M_ F_ Please circle T-Shirt size:(adult sizes) M L > (MUST BE BETWEEN THE AGES OF 13 AND 16 ONLY) Member/Associate Member Name: Last First Middle Home Address: Street City State Zip Code Telephone Number: Email Address: Nearby Airport: Member/Associate Member Employed By: Relationship to Member/Associate Member: Son Daughter OPEIU Local Union: If my child is selected for this scholarship, I fully agree to adhere to the rules that have been established by the Scholarship Committee. Signature of Parent/Guardian of Applicant: Date: Signature of Local Union President or Secretary-Treasurer: I hereby certify that this member/associate member is in good standing. Signature: (Print name of signing officer):	Last	First	Middle	
Date of Birth: Sex: M F Please circle T-Shirt size:(adult sizes) M L X (MUST BE BETWEEN THE AGES OF 13 AND 16 ONLY) Member/Associate Member Name: Last First Middle Home Address: Street City State Zip Code Telephone Number: Work/Cell Number: OPEIU Local Union: Please circle T-Shirt size:(adult sizes) M L X (MUST BE BETWEEN THE AGES OF 13 AND 16 ONLY) Member/Associate Member Name: Work/Cell Number: OPEIU Local Union: Please Circle T-Shirt size:(adult sizes) M L X (MUST BE BETWEEN THE AGE OF 13 AND 16 ONLY) Member/Associate Member Name: Orline	Home Address:			
Member/Associate Member Name: Last First Middle Home Address: Street City State Zip Code Telephone Number: Work/Cell Number: Work/Cell Number: Email Address: Nearby Airport: OPEIU Local Union: Member/Associate Member Employed By: Other Relationship to Member/Associate Member: Son Daughter Other If my child is selected for this scholarship, I fully agree to adhere to the rules that have been established by the Scholarship Committee. Signature of Parent/Guardian of Applicant: Date: Signature of Local Union President or Secretary-Treasurer: I hereby certify that this member/associate member is in good standing. Signature: (Print name of signing officer):	Street	City	State	Zip Code
Last First Middle Home Address: Street City State Zip Code Telephone Number: Email Address: Nearby Airport: Member/Associate Member Employed By: Relationship to Member/Associate Member: Son Daughter Other If my child is selected for this scholarship, I fully agree to adhere to the rules that have been established by the Scholarship Committee. Signature of Parent/Guardian of Applicant: Date: Signature of Local Union President or Secretary-Treasurer: I hereby certify that this member/associate member is in good standing. Signature: (Print name of signing officer):			Please circle T-Shirt siz	e:(adult sizes) M L XL
Street City State Zip Code Telephone Number:			First	Middle
Telephone Number:	Home Address:			
Member/Associate Member Employed By:OPEIU Local Union: Relationship to Member/Associate Member: Son DaughterOther If my child is selected for this scholarship, I fully agree to adhere to the rules that have been established by the Scholarship Committee. Signature of Parent/Guardian of Applicant: Date: Signature of Local Union President or Secretary-Treasurer: I hereby certify that this member/associate member is in good standing. Signature:	Street	City	State	Zip Code
Member/Associate Member Employed By: OPEIU Local Union:	Telephone Number:	Work/0	Cell Number:	
Relationship to Member/Associate Member: Son Daughter Other If my child is selected for this scholarship, I fully agree to adhere to the rules that have been established by the Scholarship Committee. Signature of Parent/Guardian of Applicant: Date: Signature of Local Union President or Secretary-Treasurer: I hereby certify that this member/associate member is in good standing. Signature:	Email Address:	Nearby	Airport:	
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by the Scholarship Committee. Signature of Parent/Guardian of Applicant:	Relationship to Member/Associate Member:	Son Daughter	Other	
Signature of Local Union President or Secretary-Treasurer: I hereby certify that this member/associate member is in good standing. Signature: (Print name of signing officer):		nip, I fully agree to adh	ere to the rules that have	e been established
I hereby certify that this member/associate member is in good standing. Signature: (Print name of signing officer):	Signature of Parent/Guardian of Applicant: _		Date:	
Signature: (Print name of signing officer):	Signature of Local Union President or S	Secretary-Treasurer:		
(Print name of signing officer):	I hereby certify that this member/asso	ciate member is in goo	d standing.	
	Signature:			
Date: Local Union Number:	(Print name of signing officer):			
	Date: Local U	e: Local Union Number:		

The **Summer Camp** dates are **July 19th through July 24th, 2020.** There are **only 20 spaces available** and applications are selected on a first come, first served basis.

MAIL COMPLETED APPLICATION TO:

Office and Professional Employees International Union Romeo Corbeil/Gilles Beauregard Scholarship P.O. Box 1761, New York, NY 10113 Telephone: 212.367.0902

OR BY FAX: 212.727.2087 OR EMAIL: genelle@opeiu.org