

OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION

2018 - ROMEO CORBEIL/GILLES BEAUREGARD SCHOLARSHIP FUND

"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.

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.

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 www.opeiu.org - 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, 80 Eighth Avenue, Suite 610, New York, NY 10011, no later than **April 30, 2018**.

TIME AND PLACE:

The camp will take place at the **University of Missouri Campus, Columbia, MO**. The dates are **July 15th through July 20th, 2018**.

SELECTION OF SCHOLARSHIP:

Winners will be selected and notified by email by **May 31st, 2018**.

PLEASE NOTE:

This scholarship application must be signed by a Local Union Officer (see the bottom of your application). There are only two officers who can sign these forms for you. They are: Janeen Davis, Local Union President; and Amanda Kalinowski, Local Union Secretary/Treasurer.

If you need assistance obtaining a signature from your Local Union Officer, please contact Michele Noaker at OPEIU HEALTHCARE Pennsylvania. She can help you obtain the needed signature in three ways:

- 1) Address – You can mail your completed application. She will have your form signed and mail it back to you. The mailing address is: Attn: Michele Noaker / OPEIU HEALTHCARE Pennsylvania / 425 North 21st Street / Camp Hill / PA / 17011
- 2) Fax – You can fax your completed application. She will have your form signed and will fax it back to you. The fax number is: 717-635-2569.
- 3) Email – You can scan then email your completed application. She will have your form signed and will scan & email it back to you. The email address is: member@OPEIUhealth.org

ALSO, this application will ask you for your Local Union Number. This is different from your Local Unit Number, which represents the particular facility you work at. Your Local Union Number represents your local branch/chapter of OPEIU. **Your Local Union Number at OPEIU HEALTHCARE Pennsylvania is 112.**

If you have any further questions, please feel free to contact us anytime.

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APPLICATION FORM
APPLICATION DEADLINE: April 30, 2018

Name of Applicant: _____
Last First Middle

Home Address: _____
Street City State Zip Code

Date of Birth: _____ Sex: M__ F__ **Please circle T-Shirt size:(adult sizes) M L XL**
(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: _____

Email Address: _____ Nearby Airport: _____

Member/Associate Member Employed By: _____ **OPEIU Local Union:** _____

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): _____

Date: _____ Local Union Number: _____

The **Summer Camp** dates are **July 15th through July 20th, 2017**. There are **only 20 spaces available** and applications are selected on a first come, first served basis.

SEND APPLICATION TO:
Office and Professional Employees International Union
Romeo Corbeil/Gilles Beauregard Scholarship Fund
80 Eighth Avenue, Suite 610, New York, NY 10011
Telephone: 212.367.0902