

Ohio Postal Workers Union AFL-CIO

King/Valliere Scholarship

Name: _____

Address: _____
City _____ State: _____ Zip: _____

Telephone: _____ Email: _____

I will graduate from _____ High School, located
in _____ (City) on
_____ (Month & Year).

I will attend or currently attend: _____
_____ (College, University
or Technical School) in _____ (City & State).
I will be enrolled for the _____ (term) of _____ (year).

My mother, father or legal guardian is a member in good standing in a local
of the OPWU or is a member-at-large.

Name of parent: _____

Name of local: _____

Signature of Applicant

This is certification
that: _____
is a member in good standing in the _____
_____ APWU/OPWU local. For members-at-large the
certification will be completed by the state president.

Date: _____ Signed: _____
President or Secretary of Local

Send all applications to: **Terry Grant, President OPWU, 1811 Clearview
NW, Canton, Ohio 44708.**