



AIRCRAFT MECHANICS FRATERNAL ASSOCIATION

AMFA Local 11 • 1450 Empire Central, Suite 11 • Dallas, TX 75247
PHONE 214-366-4546 • WEBSITE: www.amfa11.com

2019 AMFA Local 11 Jack Coonrod Memorial Scholarship Application Form

Deadline for receipt by AMFA Local 11 LEC is 31 May 2019

The scholarship guidelines are posted on the AMFA 11 website for the 2019 award year. Please review the revised guidelines prior to submitting this application.

(Please print)

Section 1: Member and Applicant Information

Legal Name of AMFA Local 11 Member: _____

Employee Number: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone Number: _____

Daytime Phone Number: _____

Legal Name of Applicant (*if different from member*): _____

Relationship to Member: _____

Date of Birth: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone Number: _____

Daytime Phone Number: _____

Email Address: _____ (Will be used for award notification)

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Section 2: School Information

If currently attending school provide: (*Senior High School or Above*)

Name of School: _____

Phone Number: _____

School Address: _____

City: _____ State: _____ Zip: _____

Type of School:

- High School**
- Vocational School**
- Two Year College**
- Four Year College**

Grade currently enrolled in (*check one*):

- Freshman**
- Sophomore**
- Junior**
- Senior**
- Not Currently Attending**

Name and Address of accredited college or university applicant have attended since October 2018: (*Write "Same as above" if you will be attending the same school you entered above*)

Name of School: _____

Phone Number: _____

School Address: _____

City: _____ State: _____ Zip: _____

Program to be enrolled in this year:

- Two Year Degree Program**
- Four Year Degree Program**
- Vocational Program**
- Individual Career Enhancement**

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By signing below, applicant (Parent and/or legal guardian required if age 18 or below) certifies that all information contained in this application is correct at time of submission and agrees that they have read and understood the scholarship guidelines on file with AMFA Local 11. (Copy is available for preview on the AMFA Local 11 website)

Applicant (Parent and/or legal guardian if age 18 or below) agrees to allow AMFA Local 11 permission to use the applicants name in any announcement or press release regarding the scholarship program.

All applications will be reviewed and verified by the AMFA Local 11 Executive Council on the in the year in which the drawing is being done. Those applicants not meeting the criteria for entry into the scholarship drawing will be dropped from the list by the AMFA Local 11 Secretary.

It is recommended that you scan and email this application to secretary@amfa11.com maintain your confirmation copy or send it via certified mail with signature confirmation to ensure positive delivery. The AMFA Local 11 LEC will not be responsible for applications that are not received by the Secretary of AMFA Local 11 on a timely basis.

Signature of Applicant

Date

Signature of Parent or Legal Guardian
(If 18 years of age or below)

Date

Scan and E-mail secretary@amfa11.com