

## INSTRUCTIONS FOR COMPLETING BLET AUXILIARY SCHOLARSHIP APPLICATION

***Please read all instructions carefully before completing application form. Please type or print legibly using black ink. Use the checklist at the end of Page 2 to make sure you have complied with all requirements.***

- 1) The applicant must be a son, daughter, stepson, or stepdaughter of a BLET Auxiliary member ***and*** a Brotherhood of Locomotive Engineer and Trainmen member (living or deceased), with each being a member for at least one year. In addition, applicants must be accepted for admission by an accredited institution of higher education. Children of an unmarried BLET member who is also an Associate Member of the BLET Auxiliary for at least one year are also eligible.

In addition to the \$1000 scholarships awarded each year, we are now awarding a minimum of two scholarships in the amount of \$2500 each, sponsored by Locomotive Engineers and Conductors Mutual Protective Association (LECMPA). To be eligible for an LECMPA-sponsored scholarship, applicants must meet the requirements outlined above, and the BLET member in the family must also be a member of LECMPA for at least one year. **All scholarship applicants are asked to indicate whether or not the BLET member in the family is an LECMPA member on the first page of the application form.**

- 2) For high school seniors only:

- a) Complete Sections 1, 3, and 4 only – skip Section 2.
- b) Please include a **current high school transcript showing** your cumulative grade point average (GPA). **Without this your application will not be considered.**

- 3) For graduate students or students returning to school as a sophomore, junior, or senior:

- a) Skip Section 1 and complete Sections 2, 3, and 4 only.
- b) A copy of last term's (or most current) GPA must accompany your application. **GPA must be substantiated by transcript (official or unofficial). Without this, your application will not be considered.**

- 4) Application must be signed by parent or guardian ***and by the Secretary/Treasurer (S/T) of the division to which the BLET member belongs.*** If the BLET member is retired or deceased, the S/T of the division that he or she formerly belonged to is required. Applications submitted without this verification that BLET member is "a member in good standing" will lose points during the application grading process.

- 5) Verification of BLET Auxiliary Membership:

- a) For applicants whose eligibility is based on one parent being a member in good standing of a local auxiliary, **eligibility must be verified by the secretary of that local auxiliary.** Please obtain the signature of the local auxiliary secretary before submitting the application to the BLET Auxiliary National Secretary.
- b) For applicants whose eligibility is based on one parent being an Auxiliary member-at-large in good standing, eligibility will be verified by the BLET Auxiliary National Secretary upon receipt of application.

- 6) Applicants must be accepted for admission to an accredited institution of higher education in order to be considered. A copy of the acceptance letter must be included with the application.
- 7) *Current high-resolution photo must accompany application*
- 8) Completed applications must be received by BLET Auxiliary National Secretary Jodi Wallace,
- 9) **NO LATER THAN APRIL 1, 2023**. Applications received after that date **WILL NOT** be considered.
- 10) Mail to:

**Jodi Wallace, National Secretary  
BLET Auxiliary  
1804 Washington Avenue  
La Grande, Oregon 97850**

*For questions, please contact Jodi Wallace by phone at  
(541) 663-6966, or by e-mail at  
[jwallace.bletaux@yahoo.com](mailto:jwallace.bletaux@yahoo.com)*

**INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED!!!!!!**



**Use the following checklist to make sure you have included all necessary documents and complied with all application requirements:**

- One of my parents is a BLET member ***and*** one of my parents is a member of the BLET Auxiliary – **If this is not true for you, you do not qualify, and your application will not be accepted.**
- I have provided a transcript to verify my GPA - **without this, the application will be rejected.**
- My typed essay is included with my application.
- I have provided a copy of the acceptance letter from the institution of higher education I plan to attend.
- I have answered the question on Page 3 asking if my BLET parent is a member of LECMPA.
- I have obtained the signature of the secretary-treasurer of the division to which my BLET-member Parent is a member.
- I have obtained the signature of the secretary of the local auxiliary of which my Auxiliary-member Parent is a member (if applicable) – if this parent is a member-at-large, the National Secretary will Verify membership.
- My parent or guardian and I have both signed my application.
- High resolution photo included

# BLET Auxiliary Scholarship Application for 2023-2024 School Year

**PLEASE READ ALL REQUIREMENTS AND INSTRUCTIONS  
BEFORE COMPLETING THIS APPLICATION**

**ELIGIBILITY:** To apply for an **Auxiliary Scholarship** award, the applicant must be a son, daughter, stepson, or stepdaughter of a BLET Auxiliary member and a Brotherhood of Locomotive Engineer and Trainmen member (living or deceased), with each being a member in good standing for at least one year. Children of an unmarried BLET member who has been an Associate Member of the BLET Auxiliary in good standing for at least one year are also eligible. In addition, applicant must be accepted for admission by an accredited institution of higher education (university, academy, college, institute of technology, vocational school, trade school, or other career college that awards academic degrees or professional certifications).

**Completed application and transcript must be received by the BLET Auxiliary National Secretary no later than April 1, 2023.**

## MAIL COMPLETED APPLICATIONS AND ALL REQUIRED DOCUMENTS TO:

Jodi Wallace, National Secretary BLET Auxiliary  
1804 Washington Avenue  
La Grande, Oregon 97850  
(541) 663-6966

Name \_\_\_\_\_

Address \_\_\_\_\_  
Street

\_\_\_\_\_ City State Zip Code

Date of Birth \_\_\_\_\_

School Last attended \_\_\_\_\_

Number of Siblings \_\_\_\_\_ Ages of Siblings \_\_\_\_\_ Number in College \_\_\_\_\_

**Name of Father:** \_\_\_\_\_

**(Father must be a member of either the BLET or the BLET Auxiliary)**

BLET Division No. \_\_\_\_\_, or  BLET Local Auxiliary No. \_\_\_\_\_, or  Auxiliary Member-at-Large

Location: \_\_\_\_\_

**Name of Mother** \_\_\_\_\_

**(Mother must be a member of either the BLET or the BLET Auxiliary)**

BLET Local Auxiliary No. \_\_\_\_\_, or  Member-at-Large, or  BLET Division No. \_\_\_\_\_

Location \_\_\_\_\_

**Is the BLET member in the family a member of LECMPA?** \_\_\_\_\_ YES \_\_\_\_\_ NO

*(If yes, then applicant is eligible to be considered for a \$2500 LECMPA-sponsored scholarship.)*

# SECTION 1

*For High School Seniors applying to an institution of higher education for the first time. Graduate students or students returning to an institution of higher education, skip to Section 2.*

**NAME OF COLLEGES TO WHICH YOU HAVE APPLIED IN ORDER OF PREFERENCE:** **Accepted?**  
*(Please include a copy of acceptance letters)*

_____	_____
_____	_____
_____	_____

**HAVE YOU WORKED WHILE IN HIGH SCHOOL? IF SO, PLEASE LIST EMPLOYER & TYPE OF WORK.**

\_\_\_\_\_  
\_\_\_\_\_

**TO BE COMPLETED BY HIGH SCHOOL AUTHORITIES (GUIDANCE DEPARTMENT) FOR HIGH SCHOOL STUDENTS ENTERING AN INSTITUTE OF HIGHER LEARNING FOR THE FIRST TIME.**

GPA \_\_\_\_\_  
NUMBER OF ADVANCED COURSES: Sophomore \_\_\_\_\_ Junior \_\_\_\_\_ Senior \_\_\_\_\_

REMARKS AND EVALUATIONS: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Phone: \_\_\_\_\_

***Please include a current high school transcript showing your cumulative grade point average (GPA). Without this your application will not be considered.***

## SECTION 2

*For graduate students or students returning to school for second, third, fourth year, etc. **High School students attending an institution of higher learning for the first time skip to Section 3.***

Married? \_\_\_\_\_ Husband's/Wife's Occupation? \_\_\_\_\_

Widowed? \_\_\_\_\_ Divorced? \_\_\_\_\_ Single? \_\_\_\_\_

Working? \_\_\_\_\_ Occupation? \_\_\_\_\_

**NAME OF COLLEGE YOU ARE ATTENDING** \_\_\_\_\_

Location? City \_\_\_\_\_ State \_\_\_\_\_

**LAST TERM'S GPA** \_\_\_\_\_ **DATE OF LATEST COLLEGE TERM ATTENDED** \_\_\_\_\_

**GPA must be substantiated by Transcripts (official or unofficial).**

## SECTION 3 – FOR ALL APPLICANTS

**WHAT SCHOLARSHIPS OR GRANTS HAVE YOU APPLIED FOR AND/OR RECEIVED?**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**Approximate cost per year: TUITION** \_\_\_\_\_ **ROOM/BOARD** \_\_\_\_\_

**What course of study are you pursuing or intending to pursue?** \_\_\_\_\_

**Degree?** \_\_\_\_\_

**Organizations in which you are active, and offices held, if any.**

---

---

---

**Mandatory: ESSAY TOPIC for 2023: The impact that the Union has had on my life**  
**Please include a short essay on a separate sheet indicating your interests, goals, extracurricular activities, and whatever else you would like to share about yourself.**

Date of application: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

**REFERENCES**

**NAME:**

**ADDRESS:**

1. \_\_\_\_\_

2. \_\_\_\_\_

**SECTION 4: FOR ALL APPLICANTS**

**TO BE COMPLETED BY PARENT OR GUARDIAN:**

To the best of my knowledge, the information provided on this form by the applicant is accurate.

Signature \_\_\_\_\_ Phone: \_\_\_\_\_

**TO BE COMPLETED BY LOCAL AUXILIARY SECRETARY TO VERIFY ELIGIBILITY OF AUXILIARY MEMBER PARENT. IF AUXILIARY MEMBER PARENT IS A MEMBER-AT-LARGE, PLEASE LEAVE BLANK AS THE AUXILIARY NATIONAL SECRETARY WILL VERIFY ELIGIBILITY UPON RECEIPT OF APPLICATION.**

*To the best of my knowledge, the information given by the applicant meets respective eligibility requirements.*

Name of Auxiliary Secretary (Printed) \_\_\_\_\_ Phone: \_\_\_\_\_

Signature: \_\_\_\_\_ Auxiliary No. \_\_\_\_\_

**TO BE COMPLETED BY BLET DIVISION SECRETARY/TREASURER TO VERIFY ELIGIBILITY OF BLET MEMBER PARENT:**

Name of Division S/T (Printed) \_\_\_\_\_ Phone: \_\_\_\_\_

Division No. \_\_\_\_\_ Signature of S/T \_\_\_\_\_