

Communications Workers of America Minority Caucus



Scholarship 2025

Children and Legal Wards of CWA Minority Caucus Members in Good Standing as of June 27, 2025, are eligible to compete for two \$1,000 Minority Caucus Scholarships. One of the two Scholarships will be granted to a graduating high school senior in memory of Norma Powell. The other scholarship will be granted to a student already enrolled in a college, university, or institution of higher learning in memory of Eduardo Diaz.

ELIGIBILITY REQUIREMENT INSTRUCTIONS

1 ENROLLMENT:

- A) Currently enrolled in an Accredited College or University with a 2.5 GPA or higher
- B) Currently enrolled in an Accredited Institution of Higher Learning with a 2.5 GPA or higher
- C) 2025 High School Graduate with an acceptance to either A or B for the Fall of 2025

II SUBMISSION:

- A) Scholarship Application
- B) Most Recent Transcript
- C) Essay: Minimum of 400 words typewritten: What is your perspective of the Minority Caucus' role with the Communications Workers of America as it relates to the Labor Movement in the United States of America?
- D) List of awards you have received, along with dates
- E) Describe with dates the community service activities you have performed
- F) Share with us why this scholarship is important to you

- G) Provide two reference letters supporting your application
- H) Sponsoring Minority Caucus member information
- I) *Optional: Forward* a 5x7 or 8x10 photo, which will be used in our presentation for scholarship winners. Photos may not be returned.

RETURN ALL DOCUMENTS (POSTMARKED BY JULY 12, 2025) TO:

RENEE WILDER
CWA MINORITY CAUCUS SCHOLARSHIP AWARD 2025
230 PARKWAY AVENUE
TRENTON, N.J. 08618

Any Additional Questions Contact RENEE WILDER
(908-966-6486)

Please Note: * All scholarship funds will be forwarded to the College, University, or Institution of Higher learning. *Must be an enrolled student for Fall 2025

CWA MINORITY CAUCUS SCHOLARSHIP
APPLICATION 2025 (Please print clearly)

APPLICANT NAME: _____
ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____
HOME TELEPHONE # () _____ CELL PHONE # () _____
Area Code Area Code

COMPLETE EITHER A or B

A) COLLEGE, UNIVERSITY OR INSTITUTION OF HIGHER LEARNING

NAME OF COLLEGE, UNIVERSITY OR INSTITUTION OF HIGHER LEARNING

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

MAJOR COURSE OF STUDY _____
OR

B) GRADUATING HIGH SCHOOL SENIOR ENTERING COLLEGE,
UNIVERSITY OR INSTITUTION OF HIGHER LEARNING

NAME OF HIGH SCHOOL _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

MAJOR COURSE OF STUDY _____

NAME OF COLLEGE, UNIVERSITY OR INSTITUTE OF HIGHER LEARNING FOR FALL 2024

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

MAJOR COURSE OF STUDY _____

APPLICANT'S SIGNATURE _____ DATE _____

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SPONSORING MINORITY CAUCUS MEMBER
INFORMATION SCHOLARSHIP 2025

NAME _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

CWA LOCAL # _____ DISTRICT # _____

IF APPLICABLE, POSITION HELD _____

RELATIONSHIP TO SCHOLARSHIP

APPLICANT _____

HOW MANY YEARS HAVE YOU BEEN A MEMBER OF THE CWA MINORITY CAUCUS? _____

LIST WAYS IN WHICH YOU HAVE SUPPORTED THE CAUCUS DURING YOUR MEMBERSHIP

SPONSOR'S SIGNATURE _____ DATE _____