

SHEILA W. JORDAN SCHOLARSHIP PROGRAM PACKET 2023

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City Union of Baltimore
Local 800, AFT, AFL-CIO



Return completed application to:
City Union of Baltimore
2117 N. Howard Street.
Baltimore, MD 21218-5603
Attn: Sheila W. Jordan, Scholarship

CUB

City Union of
Baltimore's
SHEILA W. JORDAN
SCHOLARSHIP PROGRAM



ALERTING OUR YOUTH
KNOWLEDGE IS POWER

PLEASE POSTMARK OR HAND DELIVER BY October 23, 2023



SHEILA W. JORDAN SCHOLARSHIP

This scholarship is awarded in honor of the memory of Sheila W. Jordan. Ms. Jordan began her career with the Baltimore City Department of Corrections and later worked in the newly formed Mayor's Office of Information Technology (MOIT). In both positions she worked effortlessly to improve the working conditions of Baltimore City Employees. She was also known as an enthusiastic advocate for education.

Ms. Jordan was one of the original organizers of The City Union of Baltimore (CUB). The Union received its charter from the American Federation of Teachers in January of 1988. Ms. Jordan began working as a Labor Relation Specialist for CUB and eventually progressing to Staff Director. Ms. Jordan continually worked to organize the membership of the City Union of Baltimore. In 1996 Ms. Jordan was elected President of the City Union of Baltimore where she served as President until her untimely passing in 2001.

In memory of Ms. Jordan and her determination and dedication to organize members, to advocate for higher education and to improve the lives and working conditions of Baltimore City employees the Sheila W. Jordan Scholarship was created. The very first scholarship was awarded in August 2002.

Sheila W. Jordan, Scholarship



- **Application :** *Filled out completely.*
- **Essays / Statement of goals:** *Prepare a concise statement (300-500 words of your professional goals. If you have not decided on a career path, discuss why you believe higher education is important to your future.*
- **Letter Of Recommendation :** *obtain three letters of recommendation, one personal, one professional and one academic from persons who can evaluate your ability, performance and potential for success.*
- **Documentation:** *Arrange to have all relevant grades, SAT, ACT and /or entrance exams scores included .*
- **Proof of Acceptance:** *Submit a copy of your acceptance letter or your official school schedule from your enrolled institution.*

TO BE COMPLETED BY APPLICANT

(Please print in black ink or type)

Applicant's Name: _____
Address: _____
City: _____ State _____ Zip _____
Phone : _____ Email _____
Date of birth _____ Graduation date _____ 20 _____

What activities did/do you participate in at your high school:

List any academic honors that have received: _____

List universities or colleges you have been accepted to, attend, or applied to for acceptance: _____

All essays written as part of the Sheila W. Jordan , scholarship application process become the property of City Union of Baltimore. CUB retains the right to reprint some or all of the winning essays in union publications and to identify the authors of the winning essays. CUB also reserves the right to reprint, describe or excerpt these essays and /or photos in other publications or to assign those rights to others.

Signature : _____ Date: _____

TO BE COMPLETED BY SCHOOL/EMPLOYER



Dear School/Employer Representative:

This student/employee is an applicant for a Sheila W. Jordan, Scholarship . As an aid in the selection process it is necessary that the Sheila W. Jordan scholarship selection committee receive the information regarding the student's/employee's character, ability and performance sought in this section. This information will be used only by the scholarship selection committee . It is important that this section be completed and returned to the applicant so that he/she has sufficient time to submit their entire application postmarked no later than October 23, 2023

Name of School/Employment _____
Address _____
City _____ State _____ Zip _____

Who is rating the student/employee?

Name _____ Email _____ Phone _____

Relationship _____ (e.g., principal, teacher, supervisor), Length of relationship ? _____

What is your general evaluation of this student/employee:

Please include any Scholastic Aptitude test(SAT) or American College test (ACT) scores _____
GPA _____.

Signature _____ Date _____

TO BE COMPLETED BY PARENT, LEGAL GUARDIAN OR FINANCIALLY-RESPONSIBLE GRANDPARENT WHO IS A FULL DUES PAYING MEMBER OF THE CITY UNION OF BALTIMORE

—————→
Name: _____

Address : _____

City : _____ State _____ Zip _____

Phone: (_____) _____ Cell (_____) _____ Email _____

Employer: _____ Work Phone (_____) _____

Local Number: _____ Retiree chapter _____

Check one: Parent

Legal Guardian

Financially – Responsible Grandparent

ATTACH PROOF OF MEMBERSHIP: MEMBER COPY OF MEMBERSHIP CARD/work ID

Applicants receiving the Sheila W. Jordan Scholarship



will be notified by email as to when and where the ceremony will take place. We wish you success and thank you for Applying for the Sheila W. Jordan Scholarship!

