

## **UUP BENEFIT TRUST FUND SCHOLARSHIP APPLICATION**

On the following page, is the UUP Benefit Trust Fund Scholarship Application. This scholarship is for dependent children of actively employed participants who are eligible for Fund benefits. UUP Retiree Members, COBRA participants and Direct Payment participants are not eligible. To qualify for the \$500 scholarship, your dependent children must meet the following criteria:

- Dependent children must be eligible for and enrolled in the UUP Benefit Trust Fund on the last day of the semester for which they are applying. Please refer to the UUP Benefit Trust Fund booklet for dependent eligibility rules.
- Dependent children must provide **official** transcripts showing at least 12 undergraduate credit hours earned toward degree requirements in the semester for which they are applying. For example, if 14 credits have been completed and a student fails a 3-credit course, only 11 credits have been earned.
- Dependent children must have taken those credits at a **state-operated** SUNY school. (This does not include, for example, community colleges, Cornell University, Fashion Institute of Technology, Alfred University and Alfred Ceramics). The list of **state-operated** SUNY schools appears below.
- Dependent children must provide **official** transcripts showing a 2.0 grade-point average or higher in the semester for which they are applying.
- Applications and official transcripts, or transcript requests, must be postmarked within 60 days from the last day of the semester for which they are applying.
- The scholarship award may be used for tuition, fees, books or supplies.

The applications *must* be postmarked within the 60-day application period. A maximum of one (1) scholarship per dependent child will be awarded each semester, even if both parents are UUP members. A maximum of eight (8) scholarships can be awarded per eligible dependent child. Scholarship checks will be issued in the UUP member's name and address of record.

If you have any questions regarding the scholarship program, please contact the Fund at 800-887-3863.

### ***UUP Benefit Trust Fund***

### **State Operated SUNY Schools**

SUNY Albany	SUNY Geneseo
SUNY Alfred	SUNY Maritime
SUNY Binghamton	SUNY Morrisville
SUNY Brockport	SUNY New Paltz
SUNY Brooklyn HSC	SUNY Old Westbury
SUNY Buffalo Center	SUNY Oneonta
SUNY Buffalo HSC	SUNY Optometry
SUNY Buffalo State	SUNY Oswego
SUNY Canton	SUNY Plattsburgh
SUNY Cobleskill	SUNY Potsdam
SUNY Cortland	SUNY Purchase
SUNY Delhi	SUNY Stony Brook
SUNY Empire State	SUNY Stony Brook HSC
SUNY Environmental Science and Forestry	SUNY Upstate Medical University
SUNY Farmingdale	SUNY Utica Rome
SUNY Fredonia	



**UNITED UNIVERSITY PROFESSIONS  
BENEFIT TRUST FUND**  
P.O. Box 15143  
Albany, NY 12212-5143

800-UUP-FUND  
800-887-3863  
Fax 866-559-0516  
www.uupinfo.org  
benefits@uupmail.org

## SCHOLARSHIP APPLICATION

### *UUP MEMBER INFORMATION*

Name: (please print) \_\_\_\_\_

Is spouse/domestic partner also a UUP member? \_\_ Yes \_\_ No    If so, name \_\_\_\_\_

Address: \_\_\_\_\_

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

UUP Member's Campus of Employment\*: \_\_\_\_\_

**\*Please Note:** Eligibility is contingent on active employment. UUP Retiree Members, COBRA and Direct Payment participants are not eligible.

### *STUDENT INFORMATION (Student must be an eligible child in the UUP Benefit Trust Fund at semester end.)*

Name: (please print) \_\_\_\_\_

Address: \_\_\_\_\_

SS#: \_\_\_\_\_

SUNY School Attended: \_\_\_\_\_

Semester Start Date: \_\_\_\_\_ Semester Ending Date: \_\_\_\_\_

Credits Earned this Semester: \_\_\_\_\_ Semester Grade-point Average: \_\_\_\_\_

Expected Graduation Date: \_\_\_\_\_ Date Enrolled in SUNY: \_\_\_\_\_

*Official transcript or transcript request must be attached (Note: Eligible students may receive this award for a MAXIMUM of 8 semesters.)*

Applications must be postmarked **within 60 days** of the conclusion of the semester for which you are applying.  
 If official transcript is being sent under separate cover, enclose proof of transcript request and check this box.

- Please check to ensure the eligible dependent child is meeting the scholarship requirements:
- Earned at least 12 undergraduate credit hours toward degree requirements for this semester
  - Grade-point average of 2.0 or higher for this semester (as shown on the official transcript)
  - Credits earned at a state-operated SUNY school (e.g., does not include SUNY community colleges)
  - Application must be postmarked within 60 days after the ending date of this semester
  - Scholarship will be used only for tuition, fees, books or supplies

**Pending IRS approval for a tax-free scholarship, additional information may be required.**

*I hereby affirm that the responses on this application are true to the best of my knowledge and I understand that any misrepresentation will automatically disqualify me from receiving a scholarship award. I further agree to abide by all conditions contained therein.*

Member Signature \_\_\_\_\_ Date \_\_\_\_\_

Dependent Signature \_\_\_\_\_ Date \_\_\_\_\_

*Please return this application, with transcript information attached, to UUP Scholarship, P.O. Box 15143, Albany, NY 12212-5143*