



**BRADLEY ELECTRICIANS ENDOWED
SCHOLARSHIP APPLICATION**

Academic year for which you are applying: 20____-20____

Student Information

Student's Name: _____

Student's Bradley ID Number: _____

Home Address: _____

Expected Date of Graduation: _____

Parent/Spouse Information

IBEW Local #34 Member's Name: _____

(please attach a copy of current membership card)

IBEW Member's Social Security Number: _____ - _____ - _____

Home Address: _____

Return application **with a copy of current IBEW local #34 membership card** to:

Bradley University
Office of Financial Assistance
1501 W. Bradley Avenue
Peoria, IL 61625
Fax 309-677-2798

Applications received by March 1st will receive full consideration.