



Telephone: 212-815-1000

# District Council

**LILLIAN ROBERTS**  
Executive Director  
**EDDIE RODRIGUEZ**  
President  
**CLIFFORD KOPPELMAN**  
Secretary  
**MAF MISBAH UDDIN**  
Treasurer

## The Lillian Roberts Scholarship Application Deadline Date: October 31, 2014 FOR DC 37 MEMBERS ONLY

\* Your PID# is located on your prescription drug card and your DC 37 membership Card.

*PID#* \_\_\_\_\_

### Vice Presidents:

Robert D. Ajaye *Last Name* \_\_\_\_\_ *First Name* \_\_\_\_\_  
Dilcy Benn \_\_\_\_\_  
Carmen Charles \_\_\_\_\_  
Santos Crespo \_\_\_\_\_ *Apt.* \_\_\_\_\_  
Sirra Crippen \_\_\_\_\_  
Michael L. DeMarco \_\_\_\_\_ *City* \_\_\_\_\_ *State* \_\_\_\_\_ *Zip* \_\_\_\_\_  
Cuthbert B. Dickenson \_\_\_\_\_  
Juan A. Fernandez \_\_\_\_\_  
Jon Forster \_\_\_\_\_ *Work Phone* \_\_\_\_\_ *Home Phone* \_\_\_\_\_  
Jonathan H. Gray \_\_\_\_\_ *Work* \_\_\_\_\_  
Robert K. Herkommer \_\_\_\_\_ *Schedule* \_\_\_\_\_ *Hours:* \_\_\_\_\_ *Days:* \_\_\_\_\_  
Dennis Ifill \_\_\_\_\_ *Cell Phone* \_\_\_\_\_  
Eric Latson \_\_\_\_\_  
Dishunta Meredith \_\_\_\_\_ *Work* \_\_\_\_\_  
Israel Miranda, Jr. \_\_\_\_\_ *Location* \_\_\_\_\_ *Job Title* \_\_\_\_\_  
Eileen M. Muller \_\_\_\_\_  
Deborah A. Pitts \_\_\_\_\_  
Walthene Primus \_\_\_\_\_ *Agency* \_\_\_\_\_ *Local* \_\_\_\_\_ *Personal* \_\_\_\_\_  
Joseph Puleo \_\_\_\_\_ *Email* \_\_\_\_\_  
Alma G. Roper \_\_\_\_\_  
Jackie Rowe-Adams \_\_\_\_\_  
Peter Stein \_\_\_\_\_  
James J. Tucciarelli \_\_\_\_\_  
Esther (Sandy) Tucker \_\_\_\_\_  
Anthony Wells \_\_\_\_\_

### Applicant's Education Information

Full name of the accredited college, university, community college, technical or trade school that you are currently attending

### Associate Directors

Henry A. Garrido School Name: \_\_\_\_\_  
Oliver Gray Street Address: \_\_\_\_\_

### Retirees Association

Rochelle Mangual Major or area of concentration \_\_\_\_\_

Signature \_\_\_\_\_

### CHECKLIST

Please check to make sure that you have included all of the following information. Incomplete applications will not be considered for scholarship awards.

1. Completed application form
2. Proof of current union membership
3. Official School transcript issued by an accredited institution
4. Proof of enrollment for semester you will be entering
5. A sealed letter of recommendation from a teacher, community or religious leader, counselor or employer
6. A typed essay of no less than 250 words describing how The Lillian Roberts Scholarship would help you in pursuing your educational goals.

Please forward completed application by October 31, 2014 to:  
District Council 37 Education Committee, 125 Barclay Street, room 814, New York, NY 10007  
Att: Valerie Francis