INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES
S. FRANK “BUD” RAFTERY SCHOLARSHIP AWARDS

Mail to
IUPAT Scholarship Committee
7234 Parkway Drive
Hanover, MD 21076

Phone: (410) 564-5900
Fax: 1-866-656-4125
The Benefit of Constituency Groups

At the 25th General Convention held in Washington DC in August 1984, to honor his service to the International Union all his adult life and his accomplishments and progressive thinking, a resolution was passed creating the S. Frank “Bud” Raftery Scholarship Fund.

At the 27th General Convention held in Washington DC, DC, in August 1994, General President A. L. “Mike” Monroe and the General Executive Board, who believe strongly in the principles for which the Scholarship Fund was created, and the need to continue and enhance this Convention theme of Organizing, Education and Training designed to bring all of our members and their families into the strategic planning and operation of our International Union through educational programs, passed a resolution to increase the S. Frank “Bud” Raftery Scholarship Fund to $20,000, allowing for (10) scholarships of $2,000 annually.

The scholarship awards are contingent upon the student attending a certified college, university, vocational/technical or other such institutions of higher learning. Award winners must enroll in the school of their choice within a year of the award date or forfeit the award.

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Details and an application form are carried in a fall issue of the “Painters and Allied Trades Journal.” The deadline for essays to reach the International Union Headquarters is March 31, 2020 and winners will be announced in May 2020.

PLEASE NOTE: PREVIOUS SCHOLARSHIP WINNERS OF THIS AWARD, OR THE MONROE/Williams Sports Scholarship Award, ARE NOT ELIGIBLE TO APPLY. IUPAT Members or Fund Administrators and Employees are ineligible to apply.

APPLICATION FORM (must be submitted with the essay)

Last 4 SSN/SIN ____________________     List the college, university, voc. tech./trade or other such institution of higher learning you are attending or planning to attend.

Name ____________________________     Briefly describe the course of study you intend to pursue and the educational goals you have established for yourself.

Address __________________________     ___________________________________________________________

City/State/Zip _____________________     Date of Graduation ________________       IUPAT Local Union Number of parent who is a member _______________________

Male _________ Female ___________        IUPAT Member’s Name ________________________________________________

Date of Birth ______________________     Member’s Signature __________________________________________

IUPAT Member’s SSN/SIN ______________________ Date ________________________

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Only the last four digits of the member’s SSN/SIN are required.