

PROOF OF ENROLLMENT

Date _____

Auxiliary of the United Transportation Union
Scholarship Fund
Patricia Shacklette, President
125 American Inn Road
Villa Ridge, MO 63089-2153

DEAR SCHOLARSHIP FUND BOARD PRESIDENT:

THIS WILL CERTIFY THAT _____
IS ENROLLED AS A FULL TIME STUDENT FOR FALL TERM 2009-2010 AT:

_____ College or University

_____ Address

_____ City State Zip

STUDENT ID NUMBER: _____

Freshman Sophomore Junior Senior Graduate

SCHOLARSHIP CHECK WILL BE SENT TO THE COLLEGE/UNIVERSITY ADDRESS BELOW:

Financial Aid Office Phone Number: _____

Financial Aid Office E-mail: _____

Date Tuition Payment is Due: _____

SIGNATURE OF REGISTRAR

CERTIFIED BY:

TITLE