

# 2021 AFSCME OHIO COUNCIL 8

**Patricia  
Kittle  
and  
Leroy  
Elmore**

## SCHOLARSHIPS



Ohio Council 8  
American Federation of State,  
County and Municipal Employees,  
AFL-CIO

**Scholarship Information Inside**

## About the Scholarships

The AFSCME Ohio Council 8 Scholarship Program was created in 1982 to provide financial assistance to the children of Ohio Council 8 members to attend a four-year accredited college or university. The scholarships, two \$2,500-a-year grants for four years, are awarded annually to two different recipients, one male and one female, based on the applicant's need, academic history and higher education goals. Scholarship applications are reviewed by the union's executive board, which will award the two scholarships no later than July 1, 2021.

### Patricia Kittle and Leroy Elmore.

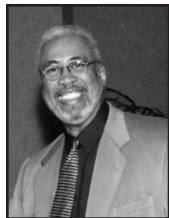
Patricia "Pat" Kittle worked as a registered nurse at Trumbull Regional Medical Center for more than 42 years. A graduate of the Trumbull Memorial School of Nursing, she embarked on a career dedicated to the selfless care for others.



A key activist during the successful nine-day strike for union recognition in 1999, Pat went on to serve as vice president of AFSCME Local 2026 for 20 years and in 2019, she became Union President.

Throughout her career Pat continued her activism. She served on AFSCME International's Nursing Advisory Committee, AFSCME's Nursing congress, as a Volunteer Member Organizer, and oversaw the local union's Member Action Team.

A caring individual, she was a person who could solve any problem with grace and efficiency, Pat passed away in June of 2020.



Leroy Elmore started his health care career in the 1960's and was employed by Cleveland's Mt. Sinai Hospital as a pathology assistant starting in 1971. A year later, he was instrumental in forming an AFSCME local union where he served as a member, steward and union president for more than ten years.

In 1985, he joined the AFSCME International project staff as an organizer. In 1987, he became an Ohio Council 8 staff representative in the Cleveland Region and in 1998, he became Regional Director.

In 2001, he joined the AFSCME Ohio Care Plan as Plan Administrator and served for 12 years before retiring, topping off a 39-year AFSCME career.

Leroy lives in Euclid Ohio and is still active in the community.

## Guidelines

### Please Review the Following Before Submitting an Application ELIGIBILITY

An applicant's parent must be an AFSCME Ohio Council 8 affiliated local union member who has been in good standing for at least one (1) calendar year prior to June 1, 2021.

An applicant must graduate from high school in the year in which application for the scholarship is made.

An applicant must attend a four (4) year accredited college or university as a full-time student.

Children of members of the AFSCME Ohio Council 8 Executive Board or of any staff member of the Council are not eligible for participation in the scholarship program.

Applications must be **postmarked** no later than **Tuesday, June 1, 2021**. Applications which are incomplete, or which are postmarked after the specified date, will be ineligible for consideration.

### APPLICATION REQUIREMENTS

An applicant must submit with his/her application two essays, each between 350 and 500 words in length. One essay is to describe why the applicant wants to attend college; the other is to describe the affect their parent's membership in AFSCME has had on their family and on them at a personal level. Content, grammar, spelling and appearance will be considered.

An applicant must submit his/her high school transcript and a written recommendation from a high school guidance counselor or teacher who has personal knowledge of the applicant.

### DISBURSEMENT OF FUNDS

Scholarship funds will be pro-rated in accordance with the college or university's academic year. Applicants awarded a scholarship will be provided with detailed information as to the requirements for proof of tuition fee payment and full-time status at the time the scholarship award is made.

Scholarship funds will be paid for any quarter or semester during which the student is enrolled full-time and has submitted proof of out-of-pocket education expenses. Reimbursable education expenses are limited to tuition or other university/college fees, expenses for textbooks and expenses for room and board, including any university/college-sponsored meal programs. Proof of out-of-pocket education expenses must be provided, and may include payment toward a student loan(s). Scholarship funds will not be paid for any quarter or semester in which a student has no out-of-pocket education expenses due to the receipt of other grants, scholarships or tuition waivers.

If, during the four-year eligibility period, a student leaves school for any quarter or semester except summer, the scholarship will be terminated for the period the individual is not a student or is a part-time student.

The scholarship will be terminated at any point the student's parent ceases to be a member in good standing of the union for any reason, except retirement or death. The scholarship will be terminated if the student fails to maintain a passing grade point average.

Termination will be effective with the beginning of the next semester or quarter following the date the parent terminated union membership.

# Application

## 2021 AFSCME Ohio Council 8 Patricia Kittle and Leroy Elmore Scholarships

---

Please complete each section in full, return with applicant statements, transcript copy, and written recommendation to: Scholarships, AFSCME Ohio Council 8, 6800 North High Street, Worthington, Ohio 43085-2512. Applications and completed statements must be postmarked no later than **Tuesday, June 1, 2021**.

### Member Information (over for student information)

Name of Member \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone: Home \_\_\_\_\_ Cell \_\_\_\_\_

Place of Employment \_\_\_\_\_ Date of Employment \_\_\_\_\_ Date of AFSCME Membership \_\_\_\_\_

Local Union Number \_\_\_\_\_ Union Activities (union offices, committees, PEOPLE member, etc.) \_\_\_\_\_

---

### Income/Expense Information

Type

Dollar Amount

Source or Type

1. Family annual take home (net) income.

2. Applicant's expected annual cost for college expenses.

3. Estimated annual contribution by parent(s) toward meeting applicant's expenses.

4. Amounts and sources of financial aid for which application is pending.

5. Amounts and sources of financial aid received to date.

6. Extraordinary expenses, e.g., other children in college, unreimbursed medical costs. List nature of expenses and annual amount.

Type	Dollar Amount	Source or Type
1. Family annual take home (net) income.		
2. Applicant's expected annual cost for college expenses.		
3. Estimated annual contribution by parent(s) toward meeting applicant's expenses.		
4. Amounts and sources of financial aid for which application is pending.		
5. Amounts and sources of financial aid received to date.		
6. Extraordinary expenses, e.g., other children in college, unreimbursed medical costs. List nature of expenses and annual amount.		

## Student Information (over for member information)

Name of Student \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Home Phone \_\_\_\_\_ Date of Birth \_\_\_\_\_

Social Security Number \_\_\_\_\_ High School from which student is graduating in 2021 \_\_\_\_\_

High School Location \_\_\_\_\_ Current Grade Point Average \_\_\_\_\_

College or University student plans to attend \_\_\_\_\_ Date of Acceptance \_\_\_\_\_

Location of College or University \_\_\_\_\_ Enrollment Date \_\_\_\_\_

Name of Person Sending Recommendation (Note: all applicants must submit a copy of their high school transcript and a written recommendation from a high school teacher or guidance counselor) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

## Declaration of Application

We affirm that the information submitted in this scholarship application is true.

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

### Applicant's Statement

Applicant must submit, in her/his own words, two essays between 350 and 500 words each describing 1) why he/she wants to continue their education beyond high school, and 2) the effect their parent's membership in AFSCME has had on their family, and on them at a personal level. Attach separate sheets for statements. Statements must be typed or printed and returned with the application. The applicant's name should appear at the bottom of each page of the statements.