



Gerry Flynn Scholarship Application

*****APPLICATION POSTMARK DEADLINE JUNE 15, 2025*****

Intro:

TCI values education and would like to help encourage those who are working toward getting their degree. TCI is committed to the academic achievement and success of its employees and their families and would like to help foster a future of bright shining leaders. The TCI Scholarship Program awards annual scholarships to TCI company employees or their children who are currently enrolled in a school program. The program has no age limit, and all eligible individuals are encouraged to apply.

All applications must be completed, signed, and submitted along with school transcripts on or before the **deadline of June 15, 2025.**

2025 Available Scholarships

Five (5) scholarships in the amount of \$5,000 each will be awarded to the top five competitive applicants.

Eligibility:

1. Applicants must be a TCI employee or dependent/child of a TCI employee.
2. Applicants must be enrolled in a post-secondary program (vocational college, community college, State, University, etc.)

Selection Process:

The TCI Scholarship Committee will review and vote only on applications submitted by **June 15, 2025.**

Each application will be scored on the following:

1. Does the applicant meet eligibility requirements?
2. Completeness of application (application form, essay, letters, and school transcripts).
3. Content of answers.

The top five (5) applicants will be carefully selected and awarded a scholarship based on their overall score.

Scholarships will be awarded to selected applicants upon receipt of current school enrollment courses and tuition payment verification. Scholarship awards will be disbursed directly to the schools. Members of the TCI Scholarship

Review Committee are not eligible to receive any scholarship awards.

I have read and understand the instructions.

Applicant Name	Applicant Signature	Date
----------------	---------------------	------

Employee Name	Employee Signature	Date
---------------	--------------------	------



Gerry Flynn Scholarship Application

APPLICATION POSTMARK DEADLINE JUNE 15, 2025

TYPE OR PRINT ALL INFORMATION ALL APPLICATIONS MUST BE SIGNED AND DATED

APPLICANT INFO:

Last Name _____ First Name _____ Middle Initial ____
Permanent Home Address _____ Apt. No. ____
City _____ State ____ Zip Code _____
Phone Number _____ Email Address _____
How did you hear about the scholarship? _____

EMPLOYEE INFO:

Last Name _____ First Name _____ Middle Initial ____
Permanent Home Address _____ Apt. No. ____
City _____ State ____ Zip Code _____
Phone Number _____ Email Address _____
Location/ Position/ Manager _____
Applicant is the: Employee Child/ Dependent of Employee

HIGH SCHOOL INFO:

School Name _____ High School Graduation Date: Month ____ Year ____
City _____ State ____ Phone _____

POST SECONDARY INFO:

Name all postsecondary schools you previously attended. Do not use abbreviations.

School: _____ Dates Attended: From _____ To _____

School: _____ Dates Attended: From _____ To _____

Year in school Fall 2024: 1 2 3 4 Other, explain _____

Major or course of study: _____ Expected college graduation date (Month, Yr.) _____

Degree sought: Certificate AA Bachelor's Other, explain _____

Name of post-secondary school currently attending or plan to attend in the spring.

School: _____ City: _____ State: _____

School Financial Aid or Scholarship Department Phone Number: (____) _____

Address: _____ City: _____ State: ____ Zip Code: _____

Student ID Number: _____



Gerry Flynn Scholarship Application

*****APPLICATION POSTMARK DEADLINE JUNE 15, 2025*****

WORK EXPERIENCE

Describe your work experience during the past four years.

Employer and Position	Start- Month/ Year	End- Month/ Year	Hours Per Week	Were you paid for your work?

ACTIVITIES, AWARDS & HONORS

List all extracurricular activities, volunteer/ community activities, special awards, and honors during past four years (e.g., sports, music, student government etc.). Indicate whether high school or college activities.

Activity	No. of Years Participated	Special Awards, Honors	Offices Held

SHORT ANSWERS:

1. Describe how the scholarship money would impact your educational goals and why the committee should select you.
2. Explain the importance of your major and how you feel it will impact today's society.
3. Describe your most meaningful accomplishment or special attribute that sets you apart and how they relate to your field of study and your future goals.
4. Describe a family or personal circumstance that has influenced your development and your commitment to your education.
5. Where do you see yourself in 5 years? Describe how your short-term goals will help you achieve your long-term goals.



Gerry Flynn Scholarship Application

*****APPLICATION POSTMARK DEADLINE JUNE 15, 2025*****

LETTER OF RECOMMENDATION (REQUIRED):

To the Applicant: Please submit a letter of recommendation from any of the following: high school or college counselor, advisor, mentor, coach, instructor, or a work supervisor who knows you well. If incomplete, your application will not be evaluated.

To the Adult Appraiser: You have been asked to provide information in support of this application. When complete, please return to applicant or send directly to the address below.

APPLICATION CHECKLIST:

The student is responsible for submitting all materials to TCI Scholarship Review Committee on time. Incomplete applications will not be evaluated. This application becomes complete and valid only when all the following materials have been received:

- Application
- Essay
- Letter of Recommendation
- Transcript(s)

All materials, including transcript, must be addressed to:

TCI
Scholarship Review Committee
4950 Triggs St. Commerce, CA 90022
Email: scholarships@tcilogistics.com

Postmark deadline June 15, 2025

CERTIFICATION:

TCI Scholarship Review Committee has the sole responsibility for selecting recipients based on criteria as set forth in the program description. This application becomes the property of TCI. (It is recommended you keep a copy for your files.)

I acknowledge decisions are final. I certify I meet the eligibility requirements of the program as described in the guidelines and the information provided is complete and accurate to the best of my knowledge. If requested, I will provide proof of information, including an official transcript of grades. Falsification of information may result in termination of any award granted.

Applicant Signature: _____ Date: _____

Employee Signature: _____ Date: _____