



Dear Friend,

Thank you for your interest in the UCOM **CDL Scholarship Program**. We here at UCOM UrbanServ, Inc are excited to provide scholarships for **Class A Commercial Driving License** training offered at FSCJ.

Please provide the following to be considered for the program:

- Completed application
- State issued ID and current proof of residency (JEA bill, phone bill, lease agreement, etc.) will be reviewed at the interview-FLORIDA RESIDENCY IS REQUIRED FOR THIS PROGRAM
- Please note that FSCJ has a \$25 nonrefundable application fee for the CDL program.

Mail to:  
UCOM CDL Scholarship Committee  
Attn.: Shannon Kettlehut  
3349 St. Augustine Road  
Jacksonville, FL 32207

Once the committee has reviewed your application, a representative will email you to schedule an interview. Interviews are only scheduled between 12:30pm and 2:30pm. See enclosed agreement form for more information.

You may also call me at 904-396-2401 or email me at [shannonkettlehut@ucomjax.org](mailto:shannonkettlehut@ucomjax.org) if you have any questions or concerns.

Sincerely,

Shannon Kettlehut  
Director of Programs

*Working together since 1979, so no one faces crisis or hunger alone.*

---

3349 St. Augustine Road, Jacksonville, FL 32207 • (904)396-2401 • [www.ucomjax.org](http://www.ucomjax.org)

---

"A COPY OF THE OFFICIAL REGISTRATION (CH41260) AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL-FREE (800-435-7352) WITHIN THE STATE. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE. No goods or services were received in exchange for this donation. 100% of your donation is received by this organization."



TYPE OR PRINT ALL INFORMATION EXCEPT SIGNATURE

Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle Initial \_\_\_\_\_

Date of Birth \_\_\_\_\_ Social Security Number \_\_\_\_\_ Marital Status \_\_\_\_\_

Mailing Address \_\_\_\_\_

City Jacksonville State Florida Zip Code \_\_\_\_\_

Telephone (\_\_\_\_) \_\_\_\_\_ E-mail Address \_\_\_\_\_

Secondary Phone (\_\_\_\_) \_\_\_\_\_

High School **School Name** \_\_\_\_\_ **Graduation Date** \_\_\_\_\_

Data or  
Equivalent

City \_\_\_\_\_ State \_\_\_\_\_ Cumulative GPA, if known \_\_\_\_\_

Last School **School Name** \_\_\_\_\_ **Graduation Date** \_\_\_\_\_

Attended if  
Different From  
Above

City \_\_\_\_\_ State \_\_\_\_\_ Cumulative GPA, if known \_\_\_\_\_

**Describe your work experience during the past four years (food server, babysitter, office). List employer for each job, dates employed, and duties performed. Use extra paper if necessary.**

Employer	Dates Employed	Duties	Pay
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

*Working together since 1979, so no one faces crisis or hunger alone.*

3349 St. Augustine Road, Jacksonville, FL 32207 • (904)396-2401 • [www.ucomjax.org](http://www.ucomjax.org)

"A COPY OF THE OFFICIAL REGISTRATION (CH41260) AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL-FREE (800-435-7352) WITHIN THE STATE. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE. No goods or services were received in exchange for this donation. 100% of your donation is received by this organization."



FSCJ CDL applicants must complete the pre-screen for the program which is the DOT physical, the seven-panel drug screen, and the MVR check. Applicants must have a valid Florida driver's license with no more than six points in violations on his/her driver's license in the past three years and have no DUI (driving under the influence) violations within the past seven years. Is there any reason to believe that you would not pass the pre-screen? \_\_\_\_\_

If yes, please write a detailed explanation of the why you may not pass the pre-screen. \_\_\_\_\_

---

---

---

---

---

---

---

---

---

---

Please write a brief paragraph explaining your career goals and objectives and how a scholarship from the UCOM CDL Scholarship Fund will benefit you.

---

---

---

---

---

---

---

---

---

---

*Working together since 1979, so no one faces crisis or hunger alone.*

**3349 St. Augustine Road, Jacksonville, FL 32207 • (904)396-2401 • [www.ucomjax.org](http://www.ucomjax.org)**

"A COPY OF THE OFFICIAL REGISTRATION (CH41260) AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL-FREE (800-435-7352) WITHIN THE STATE. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE. No goods or services were received in exchange for this donation. 100% of your donation is received by this organization."



The UCOM CDL Scholarship Program offers many benefits, including:

- Costs of program pre-screening
- Tuition assistance to for up to 4 of the FSCJ CDL program training courses
- Books and materials
- Letter of recommendation from UCOM for job placement or education advancement

By accepting a UCOM scholarship for CDL training at FSCJ, you agree to the following:

- Complete program as scheduled (FSCJ application must be completed within 30 days of interview)
- Maintain a minimum grade of C or higher in all professional coursework
- Notify UCOM of testing date
- Notify UCOM of state exam results and employment
- Remain in contact with UCOM for a period of one year after completion of course

If you agree with the terms listed above and wish to be considered for a scholarship, please sign and date here:

X \_\_\_\_\_

*\*The CNA Scholarship Committee, under the authority of UCOM, has the sole right and responsibility for selecting recipients of a CNA Scholarship based on criteria set forth in the CNA Scholarship Program guidelines. Upon receipt of this completed application and all required paperwork, applications become the property of UCOM. Please keep a copy of your application for your records.*

*Working together since 1979, so no one faces crisis or hunger alone.*

---

3349 St. Augustine Road, Jacksonville, FL 32207 • (904)396-2401 • [www.ucomjax.org](http://www.ucomjax.org)

---

"A COPY OF THE OFFICIAL REGISTRATION (CH41260) AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL-FREE (800-435-7352) WITHIN THE STATE. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE. No goods or services were received in exchange for this donation. 100% of your donation is received by this organization."