and Associated Companies

Scholarship Fund

Cliffs places a strong emphasis on education. The Cliffs Scholarship Fund provides direct college support to children of employees.

CLEVELAND-CLIFFS INC. AND ASSOCIATED COMPANIES SCHOLARSHIP FUND

The Scholarship Fund Program

Established in 1991, the Cleveland-Cliffs Inc. Scholarship Fund provides the opportunity for children of Cliffs' employees to receive financial support towards their college education. This Scholarship Fund provides non-renewable awards to children of Cliffs' employees who will be graduating high school seniors, totaling \$2,000 for the 2019 – 2020 academic year. The number of available scholarship awards will depend upon business conditions.

Eligibility

Children of employees of Cleveland-Cliffs Inc. and Associated Companies who are graduating high school seniors with a minimum cumulative weighted grade point average of 3.0 (or equivalent) and plan to enroll in college (four-year colleges granting degrees, two-year junior and community colleges offering degrees transferable to four-year institutions) by the next fall term are eligible, provided their parent (or legal guardian) is a full-time employee of the Company. Also eligible are children of laid-off (subject to recall), disabled and deceased employees.

How to Apply

The Scholarship Fund application should be completed by the student applicant and returned to the attention of the Scholarship Fund Coordinator at the local mine site. The student's official transcript must include high school grades nine through first semester senior year. Student official transcript of grades must be sent directly from the school to the local Scholarship Site Coordinator at Cliffs in order to complete the student's application. Student must provide the Transcript Page of this application to the school when requesting official transcripts. If the student is not listed as a dependent on the parent's insurance who is employed by Cliffs, then supporting documentation must be submitted as proof of relationship, e.g. birth certificate, adoption or legal guardianship papers, etc. All materials must be received by Cliffs no later than Friday, March 15, 2019.

Scholarships will be awarded on a lottery basis and applicants will be notified in writing.

Scholarship Fund Coordinators

Cleveland/ Shared Services	Kathy Jeffries <u>kathy.jeffries@clevelandcliffs.com</u> (216) 694-5928	Northshore	Martha Schlangen martha.schlangen@clevelandcliffs.com (218) 226-6052
Toledo	Amber Brandeberry amber.brandeberry@clevelandcliffs.com (567) 202-2370	United	Sheila Peterson sheila.peterson@clevelandcliffs.com (218) 744-7644
Michigan	Julie Green julie.green@clevelandcliffs.com (906) 475-3634	Hibbing	Tina Erickson tina.erickson@clevelandcliffs.com (218) 262-6802
			Katie Stefanich <u>katie.stefanich@clevelandcliffs.com</u> (218) 262-5923

CLEVELAND-CLIFFS INC. and Associated Companies

Scholarship Fund Application

Personal Data			Scholarship application must be completed by the applicant. Incomplete applications will be disqualified. Please print or type all information.				
1. Student name	Last	First	M.I.	2. Gender			
				☐ Male ☐ Female			
3. Home address			City	State Zip Code			
4. Date of Birth	4. Date of Birth Month Day Year 5. Home telephone						
			()				
6. School System, H	igh school nar	ne and address	L	7. High school telephone			
				()			
8. First and last nam	es of each pa	rent (or guardian)					
9. Name of parent (c	or guardian) w	no is employed (or was	last employed) k	by Cliffs or Associated Company			
Relationship to st	Relationship to student Employee I.D. No.						
10. Home address of this parent				11. Telephone number where this parent			
				can be reached			
			T	()			
12. This parent is cur	rently:			t a dependent on the parent's insurance employed If no, attach supporting documentation.			
☐ Employed ☐	Disabled [Deceased	☐ Yes				
14. Employed (or last employed) at what Cliffs location or managed operation? Provide department and job title.							
45 Familian de cará		M # 5		T			
15. Employee's service	ce date	Month Day	Year	Total years of service			
40.140.4.11							
16. What college or u	iniversity do yo	ou plan to attend?					
What course of st	udy do you pla	an to pursue?					
17. Certification							
I certify that all information contained in the foregoing application is accurate.							
Signature o	f applicant —	Date					
For use by local site Scholarship Coordinator: This application reviewed by:							
☐ Meets period of eligibility ☐ Official Transcript Received							
☐ Meets Minim	☐ Application C	omplete	Name of site Scholarship Coordinator				
				Hamo of oile contourship coordinates			

Section I

Instructions - Student:

Complete this form to request an official transcript of grades, obtain parental signature, and provide this application to your high school. Once Sections I and II of this form are complete, maintain for your records.

It is the student's responsibility to confirm the transcript of grades has been received by Cliffs.

1. Student name	Last		First	M.I.
2. Home address	Address		City, State and Country	Postal Code
3. Date of Birth	Month Day	Year	4. Home telephone	
5. Transcript mail	ling information:			
Name of Cliffs	local Scholarship Site	Coordinator		
Cliffs local ma	iling address			
0.0				
6. Signature of P	arent (or Guardian)			Date
Section II				
nstructions – Sch	ool:			
			iffs Scholarship Fund, the student must id his/her parents require your assistand	
 Send transcri Acknowledge 		ne local Cliffs Schol	rades 9 through end of first semester larship Site Coordinator (address above	r high school senior year) for receipt no later than March 15, 2019
Your assistance is a	appreciated.			
Official transcript of	grades sent to Cliffs:			
Date:				
By: Name – F	Please print or type			