

America's Christian Credit Union Scholarship Program

2019/2020 School Year

Section 1: Applicant Information		
Provide applicant's personal information here.		
Full Name (First, Middle, & Last):	Date of Birth:	
ACCU Member Number:	Age as of May 31, 2019:	
Street Address:		Apt. Number:
City:	State:	Zip:
Cell Phone:	Home Phone:	
If Under the age of 18 at time of submission please complete the following section		
Name of Parent/Guardian:		
Parent/Guardian Cell Phone Number:	Parent/Guardian Home Phone Number:	
<input type="checkbox"/> Parent/Guardian Address is same as applicant <input type="checkbox"/> Parent/Guardian Address is different than applicant (if checked please provide information below)		
Parent/Guardian Address:		Apt. Number:
City:	State:	Zip:
Scholarships will be awarded to an applicant in each of the following categories. Please select the category you feel best represents you.		
Select One: <input type="checkbox"/> Foster Youth or First Generation to attend college <input type="checkbox"/> Business or Finance Major <input type="checkbox"/> Science, Math or Engineering Major <input type="checkbox"/> Social Science or Ministry Major <input type="checkbox"/> Education <input type="checkbox"/> Graduate School		

Section 2: School Information		
Provide information on the high school, college, university, or graduate program you attend/will attend.		
Name of High School:		
Address of High School:		
City:	State:	Zip Code:
Level of Completion (Check one): <input type="checkbox"/> Senior <input type="checkbox"/> Graduate <input type="checkbox"/> Earned GED		Graduation Date (or anticipated):
*College/University of acceptance:		
Name of College or University:		
Address of College or University:		
City:	State:	Zip Code:
Level of Completion (Check one): <input type="checkbox"/> Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior <input type="checkbox"/> Graduate (accepted or completing a Graduate Program)		
Units completed:	Units attending 2019	Graduation Date (or anticipated):
Name of Graduate Program:		
Address of Graduate Program:		
City:	State:	Zip Code:
Number of Units Completed:	Total Units Needed for Graduation:	Anticipated Graduation Date:

*Required for high school seniors and recent high school graduates, please provide proof of acceptance letter attached in packet for mail or in-person delivery.

Section 3: Required Documentation:

Please answer the following prompt in a form you deem fit to make an impression on our judging team. You may submit an attachment or provide a weblink (YouTube, Vimeo, Facebook, etc.).

Describe how you have made a positive impact to Reach, Serve, and Teach those within your family, school, and community. How do you plan to utilize your credit union during college, career, and in the future to manage your finances and be good stewards of God's blessings?

If providing a document or PDF please attach in packet for mail or in-person delivery.

Extracurricular Activities/Community Service

Applicant must provide name of organization, dates, and hours spent participating/serving in 2018/2019 school year.

Submission Box:

<p>Letters of Recommendation: Please provide copies of 2 letters of recommendation.</p>	
<p>Name of Reference 1: Attach letter in packet for mail or in-person delivery.</p>	<p>Name of Reference 2: Attach letter in packet for mail or in-person delivery.</p>
<p>Current School Year Transcripts:</p>	
<p>Attach documentation in packet for mail or in-person delivery.</p>	

Applicant Signature - **if applicant is under the age of 18 please provide both the applicant and the parent/guardian signature in the box below.**

Applicant Signature (if applicant is under the age of 18 please provide both the applicant and the parent/guardian signature in the box below)

Student Signature: _____

Date Signed: _____

Parent/Guardian Signature: _____

Date Signed: _____