

FANNIN FEDERAL CREDIT UNION SCHOLARSHIP INSTRUCTIONS

All applicants must have an account with this credit union that is in good standing and has been open for at least 90 prior in his/her own name to be eligible to apply for the Fannin FCU Scholarship.

All items on this application must be complete at the time it is submitted.

A copy of your high school transcript must be attached.

Submit an original essay titled “Why are Credit Unions Unique?” Limit the essay to at least 300 words, but no more than 500.

APPLICATION DEADLINE IS FRIDAY, APRIL 26, 2024. Application must be in Fannin Federal Credit Union office at 1737 North Highway 121, Bonham, Texas 75418 by 5:00 p.m. close of business on that date.

Only graduating high school seniors may apply. The scholarship money will be released to the scholarship recipient upon presenting proof of enrollment in college, trade school or certification program to the Credit Union office.

The amount of each scholarship will be determined by the amount of money approved by the Board of Directors of the Fannin Federal Credit Union and the number of applications each year. Scholarship will not exceed \$500.00 per applicant. These scholarships expire if they are not used by the applicants within 24 months and the unused funds will be reapplied to new applicants.

The funds provided by this application may be used for tuition, room and board, fuel for travel, books, etc. once the Fannin Federal Credit Union receives proof of enrollment.

You will be notified by letter if you are selected.

INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.

CHECKLIST

Completed applications must be received by Friday, APRIL 26, 2024

Please use the checklist below to help you prepare your application Packet. This sheet does not need to be returned. Make a copy of all Forms for your files.

Part I: Student Application

- _____ All personal information completed on pages 1-2
- _____ Essay
- _____ Transcript

Part II: Parent/Guardian Form

- _____ Signed release of information
- _____ Certification Signatures

Part III: Educator Recommendation Form

- _____ Page 1 to be completed by educator
- _____ Rating scale and student characteristics completed

FANNIN FEDERAL CREDIT UNION
Scholarship Application

Last: _____ First: _____ MI: _____ last 4 of SS # _____

Address: _____

Home telephone #: _____ E-Mail address: _____

Date of Birth: _____

Credit Union Account # _____

High School Attended _____
Address _____

Graduation Date _____

Name of College / Program you plan to attend _____

Intended Academic major/ career plans _____

Future Occupation _____

Applicant's Signature

Date

All applicants will receive consideration for a FFCU Scholarship without regard to sex, race, color, national origin or ancestry, religion, age, handicap, or marital status.

Name: _____

I. List school offices and leadership positions, organizations, activities, honors and awards received: attach additional page if needed _____

II. Community Service and Employment _____
Address _____

III. Explain why you want to or need to further your education:

IV. Briefly state why you feel you deserve a Credit Union scholarship:

FANNIN FEDERAL CREDIT UNION 2018 SCHOLARSHIP APPLICATION

II. Release and Certification/ School Records Information Release

Secondary School Report Release Authorization for scholarship applicant

(Print applicant’s name):

To comply with the Federal Privacy Rights of Parents and Students Act, a school must obtain a signed authorization before it can release student information for use in this scholarship program. Permission is hereby given to school officials to release secondary school record and other requested information for consideration in the Fannin Federal Credit Union Scholarship Program.

Student’s signature Date

Parent’s/Guardian’s signature Date

SCHOOL RECOMMENDATIONS

Note to Principal: The above named student is an applicant for a scholarship. To process the application, we need a record of the student’s secondary school academic performance. This information will be used only in connection with the selection of recipients and will be seen only by qualified persons involved in the selection process. Also, we request that a counselor or teacher who is familiar with the student’s character and scholastic capabilities provide the evaluation information and recommendations as requested below.

CERTIFICATION AND SIGNATURES

I certify that the above information disclosed in this application is true and correct to the best of my knowledge.

Applicant’s Signature: _____ Date Signed: _____

Parent’s/ Guardian’s Signature: _____ Date Signed: _____

School Principal’s Signature: _____ Date Signed: _____

After completing and signing this application, return it along with A TRANSCRIPT OF GRADES 9 THROUGH 12 AND SAT AND /OR ACT SCORES to the student. This application must be submitted no later than APRIL 26, 2024.

Part III – FFCU Student Scholarship Application

(Please Type or Print with black ink.)

Student Name: _____

NOTE: (1) Scholarships are awarded only to students who are members of Fannin Federal Credit Union.

(2) Scholarships are awarded to students based upon merit, not financial need.

Class Rank _____ Number in Graduating Class _____

4 yr. Average _____

Name of educator giving recommendation:

Name of School: _____

(District)

(Campus)

Daytime Phone: _____

Email: _____

- I. Rate the student applicant compared to other students you have taught or with whom you have worked. **Please circle.**

<u>4</u>	<u>3</u>	<u>2</u>	<u>1</u>
The Best	Among the Best	Like several Others	Not One of the Best

- II. Choose attributes from the list below that best describe the student applicant. **Place a checkmark in the space provided.**

<input type="checkbox"/> Self-starter	<input type="checkbox"/> Committed
<input type="checkbox"/> Needs little supervision	<input type="checkbox"/> Completes projects
<input type="checkbox"/> Abstract thinker	<input type="checkbox"/> Curious
<input type="checkbox"/> Enjoys new ideas and/or knowledge	<input type="checkbox"/> Creative
<input type="checkbox"/> Likes new and unusual products	<input type="checkbox"/> Perceives patterns

Please do not send the educator portion separately to Fannin Federal Credit Union. Return the completed form and letter of recommendation to the student, parent/guardian, or other designee responsible for returning all forms to Fannin Federal Credit Union. All three parts of the application (student, parent/guardian and educator) must be returned as one unit.

Allow ample time for completed applications to reach Fannin Federal Credit Union by Friday, APRIL 26, 2024 @ 5:00 p.m.