



COMPASS

CREDIT UNION

Helping members navigate their financial journey!

SCHOLARSHIP APPLICATION 2018-2019

Please enter your answers.	
1.	Last Name: _____ First Name: _____
2.	Mailing Address Street: _____ City: _____ State: _____ Zip: _____
3.	Daytime Telephone Number: () _____ Email Address: _____
4.	Date of Birth: Month Day Year Gender: _____
5.	Cumulative Grade Point Average (GPA): _____ (On a 4.0 scale) Attach proof of GPA. Your most recent school transcript is required.
6.	Are you the first person in your family to go to college: YES ___ NO ___
7.	Name and location of High School attending: _____
8.	A. List any academic honors, awards and membership activities while in high school: B. List your hobbies, outside interests, extracurricular activities and school related volunteer activities: C. List your non-school sponsored volunteer activities in the community:
9.	A. If you have decided on what college or trade school you will attend, please list school name: B. If not, list your top 3 choices:
11.	Is your <u>parent or legal guardian</u> an employee of CCU? Yes _____ No _____

14. On a separate sheet please type an essay (250 - 500 words) answering the questions below:

Describe how volunteer work or community service has shaped who you are today and what community service has taught you. Also, discuss in your essay any challenges or obstacles you have dealt with and overcome in life and how this will help you succeed in life.



STATEMENT OF ACCURACY FOR STUDENTS

I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge. I also consent that if chosen as a scholarship winner my picture may be taken and used to promote the Compass Credit Union scholarship program.

I hereby understand that if chosen as a scholarship winner, according to Compass Credit Union Scholarship policy, I must be present at any potential awards ceremony or Annual Meeting of the Membership on March 27, 2019 to receive my scholarship award.

I hereby understand that if chosen as a scholarship winner, according to the CCU Scholarship policy, it is my responsibility to remit to the CCU CEO the appropriate information for my scholarship to be paid directly to my educational institution for my first semester in 2019.

I hereby understand I will not submit this application without all required attachments and supporting information. Incomplete applications or applications that do not meet eligibility criteria will not be considered for this scholarship.

Signature of scholarship applicant: _____ **Date:** _____

STATEMENT OF SUPPORT BY GUIDANCE COUNSELOR

I hereby affirm that this application meets the criteria set forth by this scholarship program and that I support this application to Compass Credit Union.

High School: _____

Contact information (email and phone) : _____

Signature of Guidance Counselor: _____ **Date:** _____

Checklist

- Application
- Essay
- Resume/Activity Sheet
- Letter of Recommendation
- School Transcript
- Member of CCU by February 28, 2019

MAIL COMPLETE APPLICATION PACKAGE TO THE COMMITTEE AT:

Scholarship Committee
Compass CU
PO Box 310
Sparta, MI 49345

REMINDER:

The deadline for this application to be received by CCU is: March 15, 2019, 5:00 p.m.