



Scholarship Application

APPLICANT INFORMATION

Please print or type all requested information. Only complete applications will be considered.

Last Name First Name Middle Initial

Street Address

City State Zip Code

Home Phone Email Address

PARENT/GUARDIAN INFORMATION

Last Name First Name Middle Initial

Street Address

City State Zip Code

Home Phone Email Address

Number of other dependent children (*excluding yourself*)

EDUCATION INFORMATION

Must submit your high school transcript.

High School Graduation Date GPA

Name of accredited post-secondary school you will attend

City State Anticipated Annual Cost

School type: 2 Year Community/Junior College 4 Year College/University Vocational/Technical School
(select one)

ACTIVITIES INFORMATION

List all activities (school and community) in which you have participated, listing any awards or honors received. You may attach a separate sheet if necessary.

Name & Description of Activity	Awards/Honors Received	Years Participated	Faculty Advisor

EMPLOYMENT INFORMATION

List all jobs you have held, and include supervisors who can verify your employment. Briefly describe your responsibilities and hours worked per week. You may attach a separate sheet if necessary.

Employer	Supervisor	Responsibilities	Employment Dates	Hours per Week

ESSAY

Please attach a written essay (approximately 500 words) that includes the following:

1. Significant facts about you and your family. Families can include parents, grandparents, sibling, guardians, relatives, and/or friends.
2. The course of study you are planning to follow.
3. Your long-range personal and career goals.
4. Why this scholarship would be important to you.

APPLICATION CHECKLIST

This application becomes complete only after you have submitted the following:

- Primary Member Account Number Application Form
 Essay High School Transcripts*

* May be sent to Scholarship Selection Committee under a separate cover.

SIGNATURE

I, the applicant, certify that the information provided in this application is complete and accurate to the best of my knowledge. I also agree to allow ElecTel Cooperative Federal Credit Union to promote the scholarship award by printing my photo and name in materials and publications they choose, should I be chosen to receive the scholarship. All applicable taxes are the sole responsibility of the winner. If selected as an award recipient, the winner agrees that a copy of an admission acceptance letter will be provided before distribution of any funds.

Signature of Applicant

Date

Signature of Parent/Guardian (If applicant is a minor)

Date