

23rdAnnual Scholarship Application

ELIGIBILITY REQUIREMENTS: Open to Select Federal Credit Union members (must be at least a High School Senior) wishing to pursue higher education or further their education for career advancement. Applicants must be the primary account owner and be a credit union member in good standing (no delinquent history or NSF activity) and will be reviewed for activity (i.e. deposit frequency, use of services, etc.). The scholarship funds awarded will be made payable to the student and accredited college, junior college, or university. Parents may not apply for scholarship monies that will be used for their dependent. The dependent must apply and have his/her own account.

INSTRUCTIONS: The accuracy, completeness, legibility and quality of information provided in this application are considered an important factor in the evaluation of your application. Please type or print all information. We suggest first reading through the application prior to completing as not all information requested may be applicable. Incomplete applications will not be considered for eligibility.

- 1. Attach at least two letters of recommendation from teachers, parents, employers or any other persons who wish to recommend you.
- 2. Attach your most recent high school and/or college transcript, if applicable.
- 3. Attach a recent photo of yourself, preferably a black and white photo (color photo is acceptable).
- 4. Upon completion of this form, mail or deliver with the proper attachments to:

SELECT FCU

ATTN: SCHOLARSHIP COMMITTEE 1914 N Interstate 35 SAN ANTONIO, TX 78208

DEADLINE FOR APPLICATIONS IS APRIL 15, 2020

APPLICANT INFORMATION

NAME (CIRCLE ONE): MR. MRS. MS. MISS			
LAST: FIRST:		Ml.:	
SEX (CIRCLE ONE): FEMALE MALE			
SOCIAL SECURITY NUMBER:			
BIRTH DATE: MONTH/DAY/YEAR/_		AGE:	
HOME #: () DAYTIME PHONE #: ()			
PERMANENT ADDRESS:			
CITY: STATE:	ZIP:		
SCHOOL ADDRESS (IF APPLICABLE)			
NAME:	_ADDRESS:		
CITY:S	STATE:	ZIP:	
PHONE: ()			
HIGH SCHOOL ATTENDED (IF APPLICABLE)			
NAME:	_ ADDRESS:		
CITY:	_ STATE:	ZIP:	
COLLEGE/UNIVERSITY OR BUSINESS/TRADE SCHOOL OF YOUR CHOICE:			
NAME:	_ ADDRESS:		
CITY:	_ STATE:	_ZIP:	
UNDERGRADUATE MAJOR (IF APPLICABLE): _			
DATE COMPLETED:			
OTHER GRANTS/SCHOLARSHIPS APPLIED FOR:			
LIST ALL OTHER GRANTS/SCHOLARSHIPS RECEIVED AND AMOUNTS			
TOTAL FINANCIAL AID RECEIVED (INCLUDING LOANS, WORK STUDY, ETC.):			



FAMILY/FINANCIAL DATA

COMPLETE IF YOU ARE A DEPENDENT LIVING WITH A PARENT/GUARDIAN

NAME OF PARENT(S) OR GUARDIAN(S):
ADDRESS (IF DIFFERENT FROM ABOVE):
CITY: ST: ZIP: PH #: ()
MOTHERS OR FEMALE GUARDIAN'S AGE:
OCCUPATION: ANNUAL INCOME:
FATHERS OR MALE GUARDIAN'S AGE:
OCCUPATION: ANNUAL INCOME:
NUMBER OF FAMILY MEMBERS IN HOUSEHOLD (INCLUDING YOURSELF):
NUMBER OF FAMILY DEPENDENTS IN HOUSEHOLD (INCLUDING YOURSELF):
TO BE COMPLETED BY HEAD OF HOUSEHOLD OR LEGAL GUARDIAN (THIS INFORMATION IS CONFIDENTIAL AND WILL ONLY BE USED BY THE SCHOLARSHIP COMMITTEE IN ASSESSING THE APPLICANT'S FINANCIAL NEED.)
TOTAL ANNUAL FAMILY INCOME \$
SIGNATURE:(HEAD OF HOUSEHOLD/LEGAL GUARDIAN)
COMPLETE IF YOU ARE AN INDEPENDENT APPLICANT
SPOUSE'S AGE (IF APPLICABLE):
OCCUPATION: ANNUAL INCOME:
NUMBER OF FAMILY MEMBERS (INCLUDING YOURSELF):
NUMBER OF FAMILY DEPENDENTS (INCLUDING YOURSELF):
TOTAL ANNUAL FAMILY INCOME \$



EMPLOYMENT DATA

PRESENT EMPLOYER:	POSITION:
HOURS:	_EARNINGS \$
BIOGRAPHICAL DATA (respo	nses on separate page)
Financial Need – 100 to 300 words Please describe your particular circumstances in scholarship will have upon your situation. Please previous work experiences and discuss how you college. Professional Goals/College Choice – 150 wood Describe the professional goals you would like the enrolling in a particular program, tell us why you are enrolling in a general program, please tell us why you chose college/university.	se highlight and outline your current and u have saved or prepared for the cost of or the cost of the
Community Involvement – 100 to 200 words Please describe your involvement in Communit include community volunteering or service with community-based organizations, as designed to community members.	a local nonprofit, governmental, or
Accomplishments – 100 to 200 words Please describe your personal, professional and you are most proud. This can be, but isn't limite school in which you have participated, leadersh academic and other awards received, etc.	ed to, organizations/activities outside of
I declare, under penalty of perjury, that I meet information in this application is true and corre	• , .

DATE



SIGNATURE

Date:
Name:
Address:
Daytime Ph
E-Mail:
A cottle

