

SCHOLARSHIPS AVAILABLE FROM

Fulda Area Credit Union

GROWING TOGETHER • WORKING TOGETHER

Eligibility

1. Must be a Member of or hold a Student Savers account with the Fulda Area Credit Union.
2. Accounts must be in good standing with the Credit Union.
3. Applicant must be a senior in high school, graduating in the spring of 2018
4. Applicant must be enrolled full-time, in the fall, following spring graduation, at a technical, community college, college, or university.
5. Minimum G.P.A. 2.0 (on a 4-point scale).

Scholarship Amounts

Ten \$500.00 scholarships will be awarded.

- One \$500.00 scholarship will be awarded in Murray County.
- One \$500.00 scholarship will be awarded in Cottonwood County.
- One \$500.00 scholarship will be awarded in Nobles County.
- One \$500.00 scholarship will be awarded in Jackson County.
- Six \$500 scholarships will be awarded to the remaining applicants with the highest scores.

****Eligible applicants may only apply to receive one \$500.00 scholarship. Applicants will be categorized into Fulda, Windom/Mt. Lake, Worthington and Jackson groups based on the information submitted on your application.***

- Scholarship winners will be contacted by phone the 2nd week of March 2018. Their names will be announced in the Credit Union's April Newsletter and their presence will be requested at the Fulda Area Credit Union's annual meeting in March 2018 to be acknowledged and presented with a certificate.

Selection

Recipients will be chosen by a scholarship committee made up of 2 board members and one representative from each branch location. Applicants will be judged on the following:

- Application 20%
- Academic Profile 10%
- Essay 70%

Scholarship Rules

1. Scholarship applications must be received at a Fulda Area Credit Union branch on or before February 28, 2018 or mailed to: 850 1st Avenue N., Windom, MN 56101 with a postmark on or before February 28, 2018. Applications received or postmarked after this date are ineligible.
2. Scholarship winners will be issued a check in the name of the school for the scholarship recipient. It is the responsibility of the recipient to contact the Fulda Area Credit Union with the school name and address for the check to be issued.
3. All scholarships must be claimed by the end of business hours December 16, 2018 or the scholarship money will be forfeited.
4. Board Officials and Employees of the Fulda Area Credit Union and their immediate family and household members are not eligible.
5. Failure to complete any required section of the application, references, academic profile, or essay will result in the application being deemed ineligible.
6. In the event that there are no qualified applicants from one or more of the designated areas the funds will be distributed to any other qualified applicants of the designated areas.

Essay Question

“Credit Unions care. A common theme among credit unions is ‘people helping people’. In 250-500 words tell us how you have demonstrated the philosophy of ‘people helping people’ in your life.”

- Must be a minimum of 250 words and a maximum of 500 words.
- Must be typed.

All applicants will receive consideration for the Fulda Area Credit Union Scholarship Program without regard to sex, race, color, national origin or ancestry, religion, age, handicap, or marital status.

Scholarship applications must be received at a Fulda Area Credit Union branch or postmarked and mailed to: 850 1st Avenue N., Windom, MN 56101 on or before February 28, 2018. Applications received or postmarked after this date are ineligible.

Taxes, if any, are the responsibility of the scholarship recipient.

Fulda Area Credit Union Scholarship Application

Please type or print clearly

Personal Information:

Name: _____

Home Address: _____

City, State, Zip: _____ Phone Number: _____

Member Number (of the applicant) at FACU: _____

FACU Branch (check only one)*: Fulda (Murray County) Worthington (Nobles County)
 Windom or Mountain Lake (Cottonwood County) Jackson (Jackson County)

****the branch you select should be the one you utilize the most often***

Parent(s) and/or Legal Guardian(s) Full Name(s): _____

Educational Information:

High School Name: _____

High School Cumulative Grade Point Average: _____ on a _____ point scale.

Name of College/Technical/Community College/University Planning to Attend: _____

Intended Major: _____

Career Plans:

Future Occupation: _____

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Academic Profile

Required to complete application for the Fulda Area Credit Union Scholarship

Thank you for your assistance in completing this profile. Please return the completed form to the student.

Student's Full Name: _____

Cumulative GPA (please convert to a 4.0 scale if your school uses a different scale): _____

High School Name: _____

Address: _____

Phone Number: _____

Comments:

Signature of School Representative

Date: _____

School Representative Name (Please Print)

***Please emboss or stamp official high school seal here. Thank you.**

Fulda Area Credit Union

G R O W I N G T O G E T H E R • W O R K I N G T O G E T H E R

ESSAY QUESTION

Answer the following question: “Credit Unions care. A common theme among credit unions is ‘people helping people’. In 250-500 words tell us how you have demonstrated the philosophy of ‘people helping people’ in your life.”

Essay must be typed and be a minimum of 250 words and a maximum of 500 words. Please attach your essay to this sheet. Do not type your essay on the back of this page.

I attest that the attached essay is my original work and, to the best of my knowledge, all information contained in this application is true. I understand that by submitting this application and essay that those items become the property of *Fulda Area Credit Union*. If selected, I give the *Fulda Area Credit Union*, permission to use my name, likeness, image, voice, and/or appearance as such may be embodied in any pictures, photos, video recordings, audiotapes, digital images, and the like, taken or made on behalf of *Fulda Area Credit Union*. I agree that the *Fulda Area Credit Union* have complete ownership of such pictures, etc., including the entire copyright, and may use them for any purpose consistent with the *Fulda Area Credit Union* missions. These uses include, but are not limited to, illustrations, bulletins, exhibitions, videotapes, reprints, reproductions, publications, advertisements, and any promotional or educational materials in any medium now known or later developed, including the Internet. I acknowledge that I will not receive any compensation, etc. for the use of such pictures, etc., and hereby release the *Fulda Area Credit Union* and its agents and assigns from any and all claims which arise out of or are in any way connected with such use.

I verify that my true identity is _____, and I further verify that I am 18 years of age or older.

I have read and understood this consent and release.

If the applicant is under the age of 18 years signature of a parent or legal guardian is required. As parent/legal guardian of the above stated participant, I hereby agree and accept all of the above stated terms on behalf of my dependent.

Signature

Date