



# SCHOLARSHIP APPLICATION

ACADEMIC YEAR 2023-2024

Name of Applicant: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Other: \_\_\_\_\_  
Email: \_\_\_\_\_  
College or University: \_\_\_\_\_  
\*Grade Point Average: \_\_\_\_\_  
Honors, Awards, and Activities: \_\_\_\_\_  
Community Services: \_\_\_\_\_

**\*Required: A copy of most current semester grades must be attached with scholarship application, if not scholarship will be denied!**

Where are you currently attending college? \_\_\_\_\_  
What are you studying? \_\_\_\_\_  
List past and/or current work experience: \_\_\_\_\_

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Attach to this application:  
A brief essay on: What you would like to see in your financial institution (services and/or products).  
Also, on a separate sheet explain why you chose the course of study that you have indicated.  
You may include any information that you feel may be helpful to the Scholarship Committee.

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**Only current college students may apply.**  
**Application must be post marked no later than April 19, 2024, and mailed to:**  
***Haynes Community Federal Credit Union***  
***Attention: Scholarship Committee***  
***P.O. Box 2148***  
***Kokomo, Indiana 46904-2148***

**Applicants must be a member at the time the application is submitted to be considered for a scholarship.**

Scholarship will not be funded without proof of attendance at an accredited college has been received.

By signing this application, I verify that to my knowledge, I am not related to any of the members of the Scholarship Committee and that I am attending an approved College or University. To the best of my knowledge the answers and information supplied in this application are true and accurate. I consent to the committee verifying any information supplied.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date Signed

**All scholarships are reviewed without names being revealed to the committee.**  
**ALL DECISIONS ARE FINAL!**