



SCHOLARSHIP APPLICATION

ACADEMIC YEAR 2023-2024

Name of Applicant: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Cell Phone: _____ Other: _____

Email: _____

High School: _____

*Grade Point Average: _____ SAT Total Score and/or ACT total Score: _____

Honors, Awards, and Activities: _____

Community Services: _____

***Required: A copy of most current grade card and proof of SAT and/or ACT scores must be attached with scholarship application, if not scholarship will be denied!**

Where do you plan to attend college? _____

What do you plan to study? _____

List past and/or current work experience: _____

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.

Only High School Seniors 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 until proof of acceptance 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 will attend 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!