



## College Scholarship Application

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### **Applicant Information** *(Only complete applications will be considered.)*

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Street Address: \_\_\_\_\_ Email: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Preferred method of contact:  Phone  Email

### **ACU Member Information** (if different than applicant):

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### **Current Education Information** *(Must submit a copy of your high school or accredited college, university or vocational school transcript)*

High School/College: \_\_\_\_\_ Graduation Date: \_\_\_\_\_ GPA: \_\_\_\_\_

Name of accredited post-secondary school you will attend/are attending:

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Circle one: 2 Year Community/Junior College    4 Year College/University    Vocational/Technical

Date of Entrance: \_\_\_\_\_ Expected Date of Graduation: \_\_\_\_\_

The information provided in this Scholarship Application is true and complete. I authorize Abri Credit Union's Scholarship Committee to verify or obtain further information that the committee may deem necessary concerning my Scholarship Application. I understand that this application and video or essay will be retained by the Scholarship Committee whether or not I am awarded a scholarship. I also understand that the decision of Abri Credit Union's Scholarship Committee is final.

I, \_\_\_\_\_, hereby grant that Abri Credit Union is authorized to use my name, picture, video/essay, or any reproduction of myself for editorial or commercial purposes. Permission is hereby granted to make changes or alterations to the video/essay. I understand that this video/essay will become the property of Abri Credit Union and that they can use the concept for future ads for the credit union and/or use the video/essay in the future. The video/essay can be used by the Credit Union for publicity purposes and may be shared through various outlets, including YouTube, Facebook, and the Internet.

The undersigned warrants that he/she is at least 18 years old. If the undersigned has not reached legal age, please include a parent or guardian signature.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ (if necessary) Date: \_\_\_\_\_

**All complete scholarship applications must be received by the Scholarship Committee no later than midnight on January 31, 2023. Please submit a completed application, transcript, recommendations, and either a 60-second video or 500 word essay. You can complete the application and upload documentation online at [idmyway.com](http://idmyway.com). A PDF of the application is also available online and can be printed and mailed, along with your documentation and video/essay to: Abri Credit Union, Attn: Scholarship Committee, 1350 W. Renwick Rd., Romeoville, IL 60446.**

Thank you for applying for Abri Credit Union's Scholarship Program. We will contact you by Friday, February 17, 2023 if you have been awarded a \$1,000 scholarship.