



# Scholarship Program

**Two \$1,000 scholarships:  
Graduating high school senior OR Existing higher education  
student!**

**Winner not chosen on financial need or GPA!**

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## Who Is Eligible?

- Applicant, parents or grandparents must be Abri members for 3 months or more before application submitted\*.
  - Graduating high school senior, who plans on attending an accredited college, university or vocational school full-time for 2024-2025.
- Or**
- Full-time student currently enrolled in an accredited college, university or vocational school for 2024-2025.
  - Minimum GPA of 2.5 out of 4.0 or 3.5 out of 5.0 or higher.

## What's Required

- Short Application
- 60-second video or 500 word essay (see topic choices on following page)
- 2 recommendation forms from non-family members
- School transcripts (unofficial accepted)

## Deadlines

- Only complete applications will be considered.
- Applications must be completed online or postmarked and received by Abri Credit Union no later than midnight on **January 31, 2024**.
- Upload documentation online at [idmyway.com](http://idmyway.com) or print and mail, along with your documentation and video/essay to:  
Abri Credit Union  
Scholarship Committee  
1350 W. Renwick Rd.  
Romeoville, IL 60446

For details or to apply visit [www.idmyway.com](http://www.idmyway.com)

## Questions?

Email: [marketing1@abricu.com](mailto:marketing1@abricu.com)

Call: Lisset Cuevas (815) 267-7732 or  
Robin Piraino (815) 267-7733

## **Video or Essay Requirements**

- **Choose One Topic:**

- Why is it important to follow a budget, especially in college, and how can a budget help you with your future financial success?
- What is the best financial advice you have been given and how have you implemented that in your day-to-day activities?

### **Video**

- 60-second video/commercial.
- Video format guidelines: File size limit is 300 MB. Acceptable file formats are .MPG; .MOV; .AVI; .WMV.
- The video will not be judged on the quality of the production, but the message itself.

### **Essay**

- 500 word essay.
- Essay format guidelines: double spaced, 1" margins, 12 point Times New Roman font, 500 words or approximately 2 pages in length. No longer than 700 words, approximately 3 pages in length.

### **Distribution of Award**

- ACU will award the \$1,000 scholarships in the form of a cashier's check payable to the student and the school.
- Winners will be notified by email on Friday, February 16, 2024.

**\* Your accounts (checking, ATM, savings, etc.) must be in good standing with no delinquent or charge off loans. Abri board members and employees and their immediate families are not eligible. Students who have previously won the Abri scholarship in each category above will not be eligible to win.**



## 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, 2024. 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 16, 2024 if you have been awarded a \$1,000 scholarship.



## College Scholarship Recommendation

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You have been asked to submit a recommendation on behalf of this applicant (who cannot be a relative) for the Abri Credit Union College Scholarship. Please answer the following questions and email to [marketing1@abricu.com](mailto:marketing1@abricu.com) or fax to (815) 267-7702 by January 31, 2024.

**Name of Scholarship Applicant:**

**How do you know the Applicant?**

**What characteristics do you consider his/her greatest attributes?**

**Any additional comments:**

**Prepared by:** \_\_\_\_\_ **Occupation** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_ **Daytime Phone** \_\_\_\_\_