



Creative Expressions
2010 Scholarship Application
Graduating High School Seniors

The school you plan to attend must be accredited by a regional or national accreditation agency recognized by the US Department of Education. Completed applications and all supporting documents, including recommendation letters, must be emailed, postmarked or hand delivered by March 31, 2010. Please mail or deliver to MCCU Community Youth Foundation, 101 14th Street, Cloquet MN 55720. Unless you are responding via email, please type your responses on a separate sheet of paper. Applications may be downloaded from www.membersccu.org. Please type your answers and send in application.

Name of Applicant _____ Date of Birth ____/____/____

Address _____ Phone _____

High School _____ Graduation Date ____/____

Institution you expect to attend _____

Intended Major _____ Number of years expected to attend _____

Beginning Month and Year ____/____

1) Each applicant is to have a letter of recommendation from staff at school (such as a teacher, counselor or administrator). Please list below.

Letters must be received with your application or postmarked by March 31, 2010.

Name: _____ Title: _____

Transcripts are to be submitted with applications!

GUIDELINES: Applicants are required to submit an original work of art (essay, poem, song, painting, video, commercial, poster, etc.) or similar form of creative expression that epitomizes the Community Youth Foundation’s philosophy of “empowering youth and giving back to the community.”

CHECKLIST:

___ Completed Application ___ Transcript ___ Recommendation Letter ___ Work of art

Send All Materials To:

MCCU Community Youth Foundation
Attn: Scholarships
101 14th Street
Cloquet, MN 55720

I swear that the attached application and work of art are my original work, and all other personal information is true. I understand that the artwork and form become the property of Members Cooperative Credit Union. If selected, I agree to allow my name, photo and artwork to be used in promotional materials for Members Cooperative Credit Union.

Name _____ Date ____/____/____