

Harrison District 2 Federal Credit Union Scholarship Application

Instructions: This application must be returned to Harrison District 2 FCU. Scholarships will be awarded based upon academic records and need.

Name _____
 Last First Middle

Address _____

Phone _____ Spouse's Name _____ #of Children _____

Which Colleges and/or Universities have accepted your application? _____

Where do you plan to attend? _____

Are you presently employed? Yes _____ No _____

If yes, Employers' Name _____
Number of hours per week _____ Approximate weekly income\$ _____

Name and address (City & State) of high school from which you graduated, or are graduating from. _____

Classification this coming fall: Freshman _____ Sophomore _____ Junior _____ Senior _____

Cumulative hours at the end of last semester _____

Credit hours enrolled this semester _____

How many hours do you expect to enroll for next fall semester? _____

What is your area of concentration (major) at college? _____

Extracurricular Activities-School or Community: _____

Please attach High School or College transcripts showing grade point average and class ranking. Also a letter of school acceptance from college of choice is required.

On a separate sheet please write a paragraph or two stating your aims and desires regarding further education and future goals and attach it to your application.

Applicant's Signature _____ Date _____

