



SCHOLARSHIP APPLICATION

To apply, please complete the following:

Name of Applicant: _____
 (Print) Last First Middle

Home Address: _____
 Number and Street City State Zip

Telephone #: _____

E-Mail Address: _____

Date of Birth: _____

ACADEMIC INFORMATION

College/Trade School you have been accepted to or are enrolled in for the upcoming school year:

Address of Registrar's/Financial Aid Office:

Registrar's Telephone Number: _____

ACADEMIC INVOLVEMENT

High School or Collegiate Activities (Ex: sports, clubs, mentoring):

(CONTINUED)

COMMUNITY INVOLVEMENT

Please describe any efforts or accomplishments that demonstrate your commitment to the betterment of your community:

EMPLOYMENT

Employer	Job Title	Date of Employment
_____	_____	_____
_____	_____	_____
_____	_____	_____

ESSAY

Please write a brief explanation (maximum of 400 words) and attach it to this application explaining what new strategies you feel would be beneficial for MECECU to implement to attract membership in the age range of 16-25.

CONDITIONS OF SCHOLARSHIP

- 1. Applicant must be a primary MECE Credit Union account owner between the ages of 16 to 25, and must be accepted or enrolled in a 2 or 4 year college or trade school.**
- 2. The scholarship will be paid directly to the financial aid office of the school in which the applicant is enrolled, and credited to the account of the recipient.**
- 3. Deadline (post-marked) for this application is March 1.**
- 4. Immediate family members of MECE Credit Union Staff, MECECU Staff, Board of Directors, Supervisory Committee and prior MECECU scholarship winners are not eligible to participate in the scholarship awards program.**

ACKNOWLEDGMENT

I hereby acknowledge that I have read and understand the conditions of the scholarship, filled out the scholarship in its entirety by my own hand, and agree to the terms stated above.

APPLICANT _____

DATE _____