



# Listerhill

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## CREDIT UNION

### Listerhill Credit Union Scholarship Application

Name \_\_\_\_\_ Date \_\_\_\_\_

Date of Birth \_\_\_/\_\_\_/\_\_\_ Social Security Number (last four digits only) \_\_\_\_\_

Home Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Alt Phone \_\_\_\_\_

College/University attending/planning to attend \_\_\_\_\_

School currently attending \_\_\_\_\_

Cumulative GPA \_\_\_\_\_ Level of education completed \_\_\_\_\_

Expected graduation date \_\_\_\_\_ Major \_\_\_\_\_

#### **Scholarship Criteria**

Must be enrolled or accepted to an accredited college/university (provide copy of acceptance letter if not currently attending).

Must submit an application package containing:

- A completed application form
- Letter of Recommendation (include relationship to applicant)
- Student copy of most recent academic transcript
- List of extracurricular activities and honors
- An outline of community involvement and activities

Must be a Listerhill Credit Union member in good standing

Short essay (minimum of 250 words and maximum of 500 words) on the importance of financial literacy for the millennial generation.

**Incomplete Application Packages will not be considered**

I certify that the information given in this application is true and correct and I (i) agree to abide by all decisions of the Listerhill Credit Union Scholarship committee, (ii) agree that all decisions of the Listerhill Credit Union are final, and (iii) recognize and agree that the number of scholarships awarded, if any, shall be determined by the Listerhill Credit Union in its sole discretion. I have read and will comply with this application. If I am chosen as a recipient of this scholarship, I authorize payment to be made directly to the school I am/will be attending. If I leave the school prior to the depletion of funding from this scholarship, I agree that the remaining balance will be transferred to the school general scholarship fund and I shall have no right to any remaining balance. I further authorize disclosure of my name and social security number to the school for identity purposes and authorize Listerhill Credit Union to use my name and/or photograph in future credit union publications, promotions and advertisements. I authorize the Listerhill Credit Union Scholarship Committee to obtain a credit report and to confirm the accuracy of any and all information and documentation contained in my application.

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Signature

Date