## **United Credit Union**



## 2022 Scholarship Form (Please Type)

Please fill in ALL fields or the application will be considered incomplete.

		Personal Infor	mation		
Full Name:					
ruii Name.	Last		First		M.I.
Address:					
Address.	Street Address				Apartment/Unit #
	Olicel Address				<i>Арантон</i> Отк #
	City			State	ZIP Code
Home Phone:		Alternat	e Phone:		
Email:					
Parent/Guardian Name:	-				
		Extra-Curricular Sch	nool Activities		
	Out of S	School Activities (Clul	bs, Church, Wo	ork, etc.)	
					_
In a ma	ximum of 25 v	words, describe what	United Credit	Union mea	ns to you.
		·			•
le e mevi	imum of 25 w			ingtod og o	manahan af
in a maxi	mum of 25 w	ords, describe how y United Credit	Ou nave partic Union.	ipated as a	member of

Please list the name an	nd location of the institution you are planning to att	end.		
What fie	eld of study are you planning to pursue?			
wildt lie	sid of study are you planning to pursue:			
By signing below, I further agree that if I am awarded a scholarship, United Credit Union has my permission to publish my name in print, radio and other forms of media.				
Signature:	Date:			

## \*\*Please attach a copy of your high school transcript and ACT score\*\*

All scholarship applications must be returned to United Credit Union no later than, April 1<sup>st</sup>, 2022. If you would like to email the application, please send to <a href="mailto:gjones@unitedcu.org">gjones@unitedcu.org</a>. If you are mailing the application, please mail to:

**United Credit Union** 

**Attn: Gabriel Jones** 

P.O. Box 858

Mexico, MO 65265