

MERHO FEDERAL CREDIT UNION

CLYDE MINTMIER MEMORIAL SCHOLARSHIP APPLICATION

MERHO Federal Credit Union is offering a scholarship award of \$1000 for the 2016-2017 academic school year. The recipient will be selected based upon financial need, academic achievement, essay, and personal interview.

To be eligible:

- Applicant must currently be a MERHO Federal Credit Union member as of January 1, 2016.
- Undergraduate applicants who will be a freshman in the upcoming academic year must have a SAT score of 900 (does not include essay).
- Undergraduate applicants who are beyond their freshman year in the upcoming academic year must have a total GPA of 2.5 or greater.
- Graduate applicants must have a total GPA of 3.5 or greater.

In order to be considered for this scholarship, the APPLICANT must submit the complete application packet including all REQUIRED documents to the MERHO Federal Credit Union Office no later than July 1, 2016. Late or incomplete applications will not be considered.

Use the check boxes to assure you have gathered the required documentation:

- Completed Application form completed by applicant
- Completed Financial Need form completed by school financial aid officer.
- OFFICIAL transcripts of academic records with the latest grading period and cumulative GPA. Submit in sealed envelope from school (no copies or faxes will be accepted).
- Copy of SAT test scores.
- Essay of no more than one page describing your personal history, career goals, and most importantly, how this monetary award will help you achieve your career goals.
- Two letters of character references, one from a current faculty member and one that is work related, if possible. Family members or relatives cannot give references. Please include mailing addresses and phone numbers of references. **References may be contacted if applicant is a finalist.**

A student is eligible to reapply for this scholarship as long as need and academic standing are maintained. Prior recipients of full scholarships are ineligible to reapply.

For more information or to ask questions, call the MERHO Federal Credit Union office at 814-535-3116 and ask for Karen Walker.

Please mail or deliver your application packet to:

MERHO Federal Credit Union
15 Irene Street
Johnstown, PA 15905

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APPLICANT DATA (type or print legibly)

FULL NAME _____
(first, middle, last)

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

TELEPHONE: HOME _____ CELL _____

ACADEMIC ACHIEVEMENT

NOTES:

1. Please do not leave any questions unanswered. If question does not apply, write "N/A" (not applicable).
2. If more space is needed to thoroughly answer a question, attach a separate sheet of paper.

Name of current educational program:

Name of College/University/Professional School/2 year Technical School:

Address of School:

Length of Program: _____

Number of years already completed: Zero ___ One ___ Two ___ Three ___ Four ___ Five ___
Six ___

Number of credits earned: _____ Cum GPA: _____ Expected graduation date: _____

Number of years remaining to complete the program: _____

What professional goals do you plan to achieve when you earn your degree/diploma/certificate?

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High School

School _____
Address _____
Years attended _____ to _____ Cum GPA _____

Previous Post High School Education:

School _____
Address _____
Years attended _____ to _____ Cum GPA _____

School _____
Address _____
Years attended _____ to _____ Cum GPA _____

School _____
Address _____
Years attended _____ to _____ Cum GPA _____

Other relevant information: _____

EMPLOYMENT HISTORY

Current Employment:

Name of Company _____
Address _____
Position and responsibilities _____
Date began employment _____
Average number of hours worked/week _____

Past Employment:

Name of Company _____
Address _____
Position held _____ From _____ to _____
Reason for leaving _____

COMMUNITY VOLUNTEERISM (Describe ways that you volunteer)

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HONORS AND AWARDS RECEIVED

FINANCIAL NEED

Give the attached FINANCIAL NEED FORM to the financial officer at your school to complete for you. Submit the completed form with your scholarship application.

ESSAY

Enclose your essay with your scholarship application.

Signature _____ **Date** _____

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Financial Aid Need Form

To the applicant: Please give this form to your program's financial aid officer to complete and **return to you to be included in your scholarship application packet.**

To the financial aid officer: _____ is submitting an application for the MERHO Federal Credit Union Clyde Mintmier Memorial Scholarship and needs you to complete this form. Thank you for your help in defining this applicant's financial status/need.

1. Total cost of attendance for current academic year; _____

Estimate: year tuition/ fees _____
books _____
transportation _____
room _____
miscellaneous _____

2. Number of dependents the student has in his/her household: _____

3. Has the student completed a FAFSA form? Yes No

4. Total estimated family contribution on (EFC): _____

5. Total estimated self contribution from employment: _____

6. Is the student: dependent independent

7. Is the student a United States citizen? Yes No

8. Outstanding debt for previous education: _____

9. Outstanding debt for current education: _____

10. Amount of other scholarships and grants earned for the current year: _____

11. Estimate of financial need to support tuition, academic fees and additional expenses
 very high high moderate low no need

Any additional information related to financial need for the Committee to consider for scholarship eligibility: _____

Name of program of study: _____

Name of educational facility: _____

Address of educational facility: _____

Financial aid officer

Name: _____

Phone number: _____ E-mail address: _____

Signature: _____ Date: _____