



SCHOLARSHIPS APPLICATION

Somerset Federal Credit Union

740 County Street, Somerset, MA 02726

508-678-2851 • www.somersetfcu.com

Two \$1,000 Scholarships will be awarded

The Somerset Federal Credit Union, in conjunction with our employee sponsored *ReachOut! Program*, is proud to offer the following two \$1,000 scholarships!

Oliver C. Perry, Jr. Scholarship – This scholarship honors Oliver C. Perry, Jr. past president of the Somerset Federal Credit Union. Mr. Perry was a compassionate and caring businessman who put the credit union philosophy of “people helping people” into action throughout his career. The scholarship is awarded to students who similarly demonstrate service to others either on a personal level or by taking part in activities such as civic and community causes.

ReachOut! Scholarship – This scholarship recognizes potential community leaders who have a clear vision of how their educational and career goals can lead to realistic contributions to their community and chosen field.

Application materials and deadline

1. Fill out the included application page.
2. Write an essay that is type-written and no more than two, double-spaced pages with a maximum of 500 words. **DO NOT PUT YOUR NAME ON THIS ESSAY**, as it will be read anonymously by a committee member. *Your essay should focus on the credit union philosophy of “people helping people” and how your commitment to educational and career goals will make a difference in your community and chosen field.*
3. Completed applications should be returned in person to Somerset Federal Credit Union, or postmarked no later than May 5th of the calendar year the scholarship is offered.

Name _____ Phone _____

APPLICANT INSTRUCTIONS AND GENERAL INFORMATION - PLEASE READ CAREFULLY

1. Only Somerset Federal Credit Union members or dependents of members are eligible. Becoming a member is easy!

2. Completed applications and essay should be returned in person to Somerset Federal Credit Union, or postmarked no later than May 5th of the calendar year the scholarship is offered. Deliver in person at the Somerset Federal Credit Union during regular business hours or mail to: Scholarships, Somerset Federal Credit Union, 740 County Street, Somerset, MA 02726. Mailed applications should be sent “Return Receipt Requested.”

3. Applicants must be graduating from high school in the year which they apply.

4. We process our awards in a private and confidential manner. Awards Committee members do not know the names of the applicants about whom they are voting. The personal and financial information concerning you and your family are only disclosed by your assigned “application number,” never by the name or other identifiers.

5. Winners will be notified by approximately May 15 of the calendar year that the scholarship is offered.

TO THE APPLICANT AND PARENT(S)/GUARDIAN(S)

Please carefully review the entire application before completing any portion of it. Call Somerset Federal Credit Union at 508-678-2851 if you have any questions.

By providing the information required in this application, you will be enable us to determine your eligibility to receive funds provided specifically to help students who will attend an institution of higher education and who satisfy the evaluation requirements.

You should complete this application at your earliest convenience. Late applications will not be considered.

If any application questions are not applicable to you, please attach an explanatory note referring to the questions by number. If you need more space to complete any item(s), attach additional information and indicate the appropriate questions number(s). *GOOD LUCK!*

APPLICATION CHECKLIST

This application becomes valid only when these membership requirements and materials have been confirmed and received by Somerset Federal Credit Union.

- Complete student application
- Typed essay
- SFCU membership – scholarships are awarded only to SFCU members or dependents of members. Becoming a member is easy!**

A SCHOLARSHIP WILL BE AWARDED 1) UPON CONFIRMATION OF THE WINNING STUDENT'S COLLEGE REGISTRATION, OR 2) UPON RECEIPT OF A COPY OF THE CHOSEN COLLEGE'S ACCEPTANCE LETTER

APPLICATION

Please print neatly or type.

1. _____

Last name	First Name	Middle Name/Initial
-----------	------------	---------------------
2. Gender: MALE ____ FEMALE ____
3. Date of Birth: ____ - ____ - ____
4. Home Telephone: ____ - ____ - ____
5. Home Address: _____
6. Are you an SFCU member? Yes ____ No ____
 If not, name of parent or guardian member: _____
7. School you plan to attend in the fall: _____
8. Intended major or program of study: _____
9. Intended status next year: Full-time ____ Part-time ____ Less than half-time ____
10. Intended Residence Next Year: On Campus ____ Off Campus ____ Commuting from home ____

11. Student and community activities

List all **school-based** and **community** activities you have participated in and note significant contributions and major accomplishments in each. Include clubs, teams, musical groups, religious groups, Boy or Girl Scouts and community art endeavors. You may attach additional information as necessary. Please include the name and telephone number of the adult responsible for supervising your activities.

Supervising adults may not be related to you in any fashion. (Include a separate sheet if you need more space.)

Year(s) (9,10,11,12)	Student and Community Activity	Description of Your Contributions/ Accomplishments	Leadership Position (if applicable)	Name of Supervising Adult and Telephone #	Signature of Supervisor

12. List any honors, awards and personal achievements plus any leadership positions you have held in school or community organizations.

APPLICANT’S AND PARENT/GUARDIAN’S CERTIFICATION AND SIGNATURES

In submitting this application, I hereby certify that the information provided is complete, honest and accurate to the best of my knowledge. I also agree to permit Somerset Federal Credit Union to verify any information that I have given here and to share the information on this form, together with any supporting financial data, with any other student aid funding source to which I have applied.

I have read and understand the conditions for scholarship assistance outlined on this application.

Applicant’s Signature

Date

Parent/Guardian Signature

Date



740 County Street, Somerset, MA 02726
508-678-2851 • www.somersetfcu.com