

2024 William G. Coyne Memorial Scholarship Program Application

Eligibility Guidelines: Scholarship applicants must meet the following requirements:

- Must be a member of a family that has been a <u>member of Credit Union ONE</u> for at least 6 months (the account must also be in good standing)
- Must live in Michigan or the following Ohio counties: Wood, Lucas, Sandusky, Summit, Lake or Cuyahoga.
- Be a 2024 graduating high school senior.
- Have a **cumulative** high school grade point average of 3.0 or above.
- 30 hours or more of documented, certified community service during the Junior/ Senior year of high school ending before May 3rd, 2024.
- Plan to enroll in a 4-year college, university, or accredited trade or vocational school in the Fall of 2024.
- Employees of Credit Union ONE and their immediate family are ineligible to receive this scholarship.
- Must turn in all required documents by postmark deadline of May 3rd, 2024.

Type or neatly print the following information.

Applicant Information:

F		
Last Name		
First Name		
Middle Initial		
Address		
City		
State		
Zip Code		
Phone		
Email		
Date of Birth (mm/dd/yyyy)		
Credit Union ONE Member N	Name:	
Account Number:	Relationship to Scholarship Applicant:	
Are you an employee or an immediate family member of an employee of Credit Union ONE?		
☐ Yes ☐	No	

High School Information:

School Name	
City	
State	
Zip Code	
Phone Number	
High School Graduation Date (mm/dd/yyyy)	
Guidance Counselor/School Contact	
Guidance Counselor/School Contact Phone Number	er
Guidance Counselor/School Contact Email	
College/University Information: Names of colleges/universities you plan to attend. If	unknown, please list in order of preference the
schools to which you have applied. Use additional sl	neets if necessary. Do not use abbreviations.
School Name	
City	
State	
 Four-Year College or University Two-Year Community or Junior College Other, explain: 	
School Name	
City	
State	
Type of School:	
Degree Sought:	
□ Bachelor	
□ Associate	
□ Certificate	
Other, explain:	
Course of Study	
Expected Major/Course of Study	1
Expected College Graduation Date (mm/yww)	

Community Service

List all community service activities you participated in during your <u>Junior and/or Senior years of high school</u>, ending before May 3rd, 202 (e.g., Gleaners Food Bank, Special Olympics, Habitat for Humanity, etc.). Credit Union ONE defines community service as those activities that benefit the public good. These activities can be done in partnership with a local nonprofit, community-based and/or governmental organization with the intention to enrich the lives of community members. Any public volunteer work for charitable service agencies that benefits the student's local community will qualify. Work from multiple community service ventures can be combined to <u>achieve 30 hours or more</u>. Please also make note of leadership positions you held or currently hold in these activities.

On a separate piece of paper, please list your community service activities, descriptions, dates of participation and number of hours spent per month. Type this information on 8.5" x 11" paper, double spaced, in size 12 Times New Roman font, with your name and address at the top.

Organization	
Volunteer Activity Description	
From (mm/yyyy)	
To (mm/yyyy)	
Hours/Month	
Volunteer Supervisor	
Volunteer Supervisor Contact Phone Number	

Social Responsibility of Credit Unions Essay

Please write an essay of 300 – 500 words addressing **both** of the following topics:

- The credit union philosophy is based on cooperative principles. Describe how you exemplify those principles in your life.
- Describe how credit unions are different from other financial institutions and what the difference means to you.

Type your essay on 8.5" x 11" paper, double spaced, in size 12 Times New Roman font, with your name and address at the top. Essays of excessive length will be disqualified.

Additional Information:

Please list all scholarships, grants, financial aid awards or tuition waivers you have received or plan to receive for your collegiate career.

Source	Amount	Date Awarded

Transcript Information:

- 1. **An official transcript must be sent with this application**. Include an explanation of your high school's grading scale.
- The following section must be completed by a member of your high school staff.

Cumulative GPA:

Cumulative Weighted GPA	/4.0 Scale
Cumulative Unweighted GPA	/4.0 Scale
Is this student in good standing and on track for Spri	ng 2024 graduation?
Name of High School Representative	
Title	
Phone Number	
Email	

Application Checklist

<u>All</u> of the following materials must be submitted together and on time. Incomplete applications will not be evaluated.

High School Staff Representative Signature: ______ Date: _____

\sqcap S	tudent	agA	lication
------------	--------	-----	----------

- ☐ Social responsibility of credit unions essay
- ☐ Two letters of recommendation (one from a **teacher** and one from a **volunteer supervisor**)
- □ Letter(s) on charitable service agency letterhead, describing the volunteer duties and attesting to 30 or more hours of community service (collective hours meet 30 hours or more)
- ☐ Current complete transcript(s) of grades, including grading scale

All materials, including transcript, must be addressed to:

William G. Coyne Memorial Scholarship Program Committee

Attn: Scholarship Credit Union ONE 400 E. Nine Mile Road Ferndale, Michigan, 48220

Attn: Meagan Welsh

Postmark deadline is May 3rd, 2024.

Certification

Credit Union ONE reserves the right to select the recipients of the scholarship program based on the criteria set forth in the scholarship program description. If selected as a recipient, by signing below, applicant authorizes release of information regarding community service activities, essays and images and photos of recipient in media and marketing materials for publicity purposes. If under eighteen years of age, signature of legal parent or guardian of applicant is required below as consent for release authorization on behalf of the applicant.

Recipients are required to supply the William G. Coyne Memorial Scholarship Program Committee with complete transcripts and to notify the Committee of any change of address and school enrollment.

I acknowledge that the information included in this application is complete and accurate to the best of my knowledge.

Applicant's Signature:	Date:
D	D (
Parent/Legal Guardian Signature:	Date:
(if annlicant is under 18 vears old)	

^{*} Credit Union ONE does not discriminate on the basis of age, marital status, gender, race, color, height, weight, religion, national origin, veteran's status, citizenship, sexual orientation or disability.