

**FAIRFIELD FEDERAL CREDIT UNION  
SCHOLARSHIP APPLICANT INFORMATION:**

Name \_\_\_\_\_

Street Address \_\_\_\_\_

City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Social Security Number \_\_\_\_\_ Telephone Number \_\_\_\_\_

High School \_\_\_\_\_ Graduation Date \_\_\_\_\_

Name of college you plan to attend \_\_\_\_\_

How long have you been a member? \_\_\_\_\_

**Please share a brief history of your high school accomplishments, honors and awards:**

_____	_____
_____	_____
_____	_____

**In school and out of school activities:**

_____	_____
_____	_____

**Community service involvement and/or employment:**

_____	_____
_____	_____
_____	_____

**Elected or appointed positions held:**

_____	_____
_____	_____
_____	_____

**Career and education goals:**

_____	_____
_____	_____
_____	_____

**Reference from High School Teacher**

Student's Name \_\_\_\_\_ Date \_\_\_\_\_

Dear Teacher,

The student named above is applying for a college scholarship being granted by Fairfield Federal Credit Union. He/she will be competing against other high school senior credit union members. Please assist them by completing the valuation below. Feel free to add any additional comments you feel are appropriate. The application must be complete, signed and witnessed in order for it to be considered in our competition. The student must return the completed packet no later than April 2, 2010. Thank you for assisting your student in this competition.

**Participation in class discussion:**

- Consistently involved. Originates discussion
- Usually participates
- Occasionally participate
- Seldom participates

**Classroom Involvement**

- Eager to be involved
- Active with sincere interest
- Attentive
- Preoccupied, does other things during class
- Inconsistent, sometimes an active participant, other times not

**Tendency to Question**

- Always accepts personal responsibility
- Usually accepts
- Partially accepts
- Sometimes accepts
- Often refuses to take responsibility

**Independent Study**

- Always demonstrates significant independent study
- Sometimes demonstrates independent study
- Seldom demonstrates independent study
- Never demonstrates independent study

**Comments:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Teacher's Signature Date Witness**

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**CERTIFICATION AND RELEASE AUTHORIZATION**

The following information must be completed for the applicant to be considered for the Scholarship awards.

I certify this information is true, complete and accurate. I authorize release of this information to confirm and/or verify this application. In addition, I give permission to the Scholarship Committee (Board) to duplicate my application packet for processing and evaluation purposes.

**Member**

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Parent/Guardian**

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Application Verification (for credit union use only)**

This application will not be considered unless this section has been completed by member's credit union management.

*I hereby certify that the applicant is a member in good standing of this credit union.*

**CU Manager's Name** \_\_\_\_\_

**Signature** \_\_\_\_\_

**Official CU**

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