

Gates of the Mountains Chapter of Credit Unions

People Helping People Scholarship

Eligibility Requirements

1. Must be:
 - Graduating High School senior accepted to an accredited Montana college, University or Trade school
 - or- Currently enrolled college student in your freshman, sophomore, or junior year at an accredited Montana College, University or Trade school
 - or- High School graduate not currently enrolled in College, University or Trade school.
2. Live in one of these Montana counties: Broadwater, Cascade, Deer Lodge, Gallatin, Jefferson, Lewis & Clark, Meagher, Park, Powell, and Silver Bow.

Application Requirements

1. A completed application
2. Two essays (detailed below) of 500 words or less each
3. Personal statement
4. A resume detailing work experience and accomplishments (Please include supervisors and their contact information)
5. Two signed letters of recommendation (may be sent separately, or submitted in a sealed envelope with application)
6. Certified Transcript of your previous year's schooling and current GPA (only required for *current* High School seniors or college students)

Award Criteria (in no particular order):

1. Essays
2. Financial Need
3. Work Experience
4. Community Involvement
5. References/Recommendation Letters

Timeline

1. Completed applications (including reference letters) must be postmarked by April 13, 2018 and sent to the address on the next page (If sent via e-mail, it must be received by 11:59 pm, April 13, 2018)
2. The recipient will be notified by May 1, 2018
3. The recipient will be invited to attend the May 23 Credit Union Chapter meeting to receive the award.
4. The scholarship funds will be sent directly to the recipient's school in the fall, after enrollment is verified.

Provided by the following area credit unions and organizations:



Gates of the Mountains Chapter of Credit Unions
People Helping People Scholarship

APPLICATION

Mail completed application and attachments to:

Vocal Credit Union
Attn: Lori Hansen
Po Box 7449
Helena, MT 59604
or lori@vocal.coop

Contact Information

Applicant's Name (First, Middle, Last): _____

Address (Street, City, State, Zip): _____

Telephone: _____

*Are you a member of a credit union? _____

*If so, which one? _____

**This will not have any bearing on the scoring of your scholarship*

School Information

Please indicate your current education status as it relates to your eligibility requirements listed above:

- Graduating High School senior**
- High school graduate, not currently enrolled in college, university, or trade school**
- Currently enrolled Montana college, university, or trade school student (please specify current 2016-17 year)**
 - Freshman**
 - Sophomore**
 - Junior**

High School Attended: _____

Address (Street, City, State, Zip): _____

Graduation Date: _____

College or University you will attend this fall: _____

Address (Street, City, State, Zip): _____

Anticipated Major: _____

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Community Experience

Please detail your community involvement; including any awards received (you may attach a separate sheet, if necessary):

Financial Information

Please indicate your total family income from the most recent calendar year:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Under \$20,000 | <input type="checkbox"/> \$30,001-40,000 | <input type="checkbox"/> \$50,001-60,000 | <input type="checkbox"/> \$70,001-80,000 |
| <input type="checkbox"/> \$20,001-30,000 | <input type="checkbox"/> \$40,001-50,000 | <input type="checkbox"/> \$60,001-70,000 | <input type="checkbox"/> Over \$80,000 |

Describe any special financial circumstances that may cause you to have greater need for this scholarship:

Personal Statement

On a separate sheet of paper, please describe, in 200 words or less, how receiving this scholarship will help you achieve your educational and/or professional goals.

Recommendations

Please include two written recommendations from persons not related to you (preferred: at least one from a teacher, employer, etc.). A recommendation guideline is attached and may be given to those writing a reference on your behalf. These recommendations can be either in a sealed envelope with your application or sent separately. Please list below the names of the two references, so that we may ensure correct information is received.

Reference Name: _____

Phone: _____

Occupation/Relationship to you: _____

Reference Name: _____

Phone: _____

Occupation/Relationship to you: _____

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Essays

On a separate sheet(s) of paper, please complete the following essays and attach them to your application. All essays must be no more than 500 words typed.

1. The credit union philosophy is “People Helping People”. Describe how this philosophy has impacted your life. How can you adopt this motto to improve the quality of life for you and those around you?
2. Explain what constitutes good financial planning and why it is important.

Signature

I, the applicant, certify that the information provided in this application is accurate and complete, to the best of my knowledge.

Signature

Date

******Completed applications, and all supplemental materials including recommendation letters, must be postmarked no later than April 13, 2018 (or received no later than 11:59 pm on that date, if e-mailed). Applicants must meet all requirements outlined in the eligibility requirements. Applications will not be returned, and will become property of the Gates of the Mountains Chapter of Credit Unions. Illegible, incomplete, or untimely entries may be disqualified. The winner will be notified on or before May 1, 2018 by mail or phone. The recipient agrees to have their name/photos published in credit union materials. Recipient must provide enrollment details no later than July 10, 2018. After confirmation of acceptance and enrollment at an accredited Montana college, university, or trade school, for a consecutive 12 or more credits/unit hours, award checks will be paid directly to the school on the recipient’s behalf.*

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You have been asked to submit a letter of recommendation for a *People Helping People Scholarship* applicant. You may use this form as a guideline or simply answer these questions. Your recommendation can be mailed to the GOM Chapter at the address listed below or returned to the student in a sealed envelope. Complete applications, including recommendation letters are due by **April 13, 2018**.

Attn: Lori Hansen
Po Box 7449
Helena, MT 59604
or lori@vocal.coop

Name of Applicant: _____

How do you know the applicant? _____

Comment on the applicant's character: _____

What characteristics do you consider his/her greatest attributes? _____

How would you rate the applicant's potential for future personal achievement? Why? _____

Additional Comments: _____

Prepared by: _____ Occupation: _____

Signature: _____ Date: _____ Daytime Phone: _____