



# Denali Federal Credit Union's 2017 Annual Scholarship Application Form & Instructions

Applicant's Name	Denali Member Number
Permanent Physical Address	City, State, Zip Code
Mailing Address (if different from physical address)	City, State, Zip Code
E-mail Address	U.S. Citizen Y/N
Phone	Social Security Number
High School	Graduation Date
Choice of College/University	Major Area of Study
Student's Present Employer (if applicable)	Job Title and Average Weekly Hours
Parent/Guardian's Name	Address
Phone	City, State, Zip Code

The Denali Federal Credit Union Scholarship Committee will select three recipients for \$5,000 scholarships – two in Alaska and one in Washington

**Application Deadline: Monday April 3, 2017**

Scholarship application must be postmarked or delivered to any branch office of Denali Federal Credit Union by Monday, April 3, 2017. **No Deadline Exceptions.**

**Eligibility:** The applicant must be a high school senior, Alaska or Washington resident and primary member at Denali. (The primary member is the first named on the account). The scholarship must be used for attending a licensed/certified post-high school program. Applicants must have a minimum of 2.25 GPA and be enrolled as a full-time student. Denali Federal Credit Union employees, board members, supervisory committee members and their children are not eligible for the scholarship.

**Certification and Release Authorization:** I certify this information is true, complete and accurate. I authorize release of information to confirm and/ or verify this application. I agree to abide by the decisions of the scholarship committee and understand that the decisions of the committee will be final and not open to contest.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Requirements

1. You must be a primary member of Denali Federal Credit Union before the application is submitted for a scholarship. This means you are the first person listed on the account.
2. You must be a high school senior, graduating in 2017.
3. You must complete an application packet and turn it in on or before the deadline: Monday, April 3, 2017.

## Your application packet must include all of the following in the order given

1. Scholarship application form.
2. Official academic transcripts for all high schools attended.
3. Test Scores – High School Graduating Qualifying Exam (HSGQE); Scholastic Aptitude Test (SAT), American College Testing (ACT), and / or ASSET scores. If you are a student who has not been in school recently and have no test scores, please type a note to explain your situation.
4. References – submit two recommendation forms from references, such as an instructor, academic counselor, or employer. One reference must be from a recent instructor or academic counselor.

## Essays: Please keep essays no more than two pages double spaced

1. Goals – Describe your educational goals and plans for the future.
2. Accomplishments – Outline your top five accomplishments (honors, awards, leadership and extracurricular school, civic or volunteer activities) in your high school career and how they have prepared you for post-secondary education and life.

Staple all pages together in the order given above. Binders or folders will not be accepted. Failure to comply with any of the requirements will disqualify an application and the application will not be considered.

## Selection

Applications will be reviewed and judged by a committee of Credit Union members. The primary intent of the committee is to assist students in advancing their education.

Financial need is not a criterion; however, if a student is already a winner of a full scholarship or has congressional appointment to a military academy where further award will not be meaningful, application should not be made. Scholarship applications in each area will be pooled and judged against one another. Life experience will be a contributing factor. Scholarship recipients are selected without regard to race, color, religion, marital status, national origin, veteran status, sex, or handicap. The decisions of the committee are final. The committee will evaluate your application on content, overall appearance, grammar and neatness.

**Return by Monday, April 3, 2017 to Denali Federal Credit Union branch**

**Mail to: Denali Federal Credit Union**

**Attn: Marketing/Scholarship**

**440 E. 36<sup>th</sup> Ave.**

**Anchorage, AK 99503**

**Or email your application to: [marketing@denalifcu.com](mailto:marketing@denalifcu.com)**



## Scholarship Recommendation Form

Applicant's Name: \_\_\_\_\_

**PART 1**

Please circle the score which best represents your evaluation of the scholarship applicant. If you have no fair basis for judgment, please check the box under N/A.

Character	Circle Score										N/A*
	Low										
Motivation	1	2	3	4	5	6	7	8	9	10	<input type="checkbox"/>
Initiative	1	2	3	4	5	6	7	8	9	10	<input type="checkbox"/>
Originality	1	2	3	4	5	6	7	8	9	10	<input type="checkbox"/>
Leadership	1	2	3	4	5	6	7	8	9	10	<input type="checkbox"/>
Self-confidence	1	2	3	4	5	6	7	8	9	10	<input type="checkbox"/>
Warmth of personality	1	2	3	4	5	6	7	8	9	10	<input type="checkbox"/>
Concern for others	1	2	3	4	5	6	7	8	9	10	<input type="checkbox"/>
Ability to react positively to setbacks	1	2	3	4	5	6	7	8	9	10	<input type="checkbox"/>
Respect for peers and/or co-workers	1	2	3	4	5	6	7	8	9	10	<input type="checkbox"/>
Respect for adults and persons in leadership	1	2	3	4	5	6	7	8	9	10	<input type="checkbox"/>

\*Not able to make judgment.

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

School/Business: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Signature: \_\_\_\_\_

**PART 2**

Please attach a written statement regarding how this applicant has met and/or exceeded your expectations as a student or employee. **A written statement is necessary for the recommendation form to be considered by the committee. Return both parts of your completed form to the applicant.**



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Character	Circle Score										N/A*
	Low									High	
Motivation	1	2	3	4	5	6	7	8	9	10	<input type="checkbox"/>
Initiative	1	2	3	4	5	6	7	8	9	10	<input type="checkbox"/>
Originality	1	2	3	4	5	6	7	8	9	10	<input type="checkbox"/>
Leadership	1	2	3	4	5	6	7	8	9	10	<input type="checkbox"/>
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\*Not able to make judgment.

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

School/Business: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Signature: \_\_\_\_\_

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