



PREMIER COMMUNITY CREDIT UNION SCHOLARSHIP APPLICATION

Prior to beginning this application, please ensure you are a qualified recipient. Only U.S. citizens and legal residents who are members or children of Premier Community Credit Union members are eligible. Only completed applications will be considered. If you are unable to provide the documents requested (or equivalents), please do not send in the application. Applications deemed incomplete or late will not be reviewed or otherwise acknowledged. Premier Community Credit Union will not return any scholarship applications or related materials. Scholarships are only awarded directly to the winning applicant's school of choice after enrollment has been confirmed.

**** DUE DATE: Turned-in by February 15, 2017 – NO EXCEPTIONS ****

INSTRUCTIONS:

A complete application will contain the following documents:

- I. Completed, Signed Application
- II. Federal Estimated Family Contribution (see Item 1)
- III. School Transcript and Form SC-2 (see Item 2)
- IV. Recommendation Letter(s) Form SC-3 (see Item 3)
- V. Personal Essay (see Item 4)

Item II – Federal Estimated Family Contribution (EFC) - Attach the SAR (“Student Aid Report” - the government’s response to a completed Free Application for Federal Student Aid [FAFSA]). If a SAR is not available in time to file the application, a printout of the “Web Submission Confirmation” showing the EFC is acceptable, along with a copy of the submitted FAFSA application.

NOTE: Scholarship grants are weighted towards those with financial need. If the applicant feels the government’s EFC is inaccurate, please provide additional information you consider relevant to your financial situation. More information may be found at <https://studentaid.ed.gov/sa/fafsa>

Item III - School Transcript – An unofficial printout will suffice, however an official transcript will be required for all finalists. If the grading scale is non-traditional, please include explanatory information. If extenuating circumstances preclude including any of the above information, please state why.

Item IV – Recommendation Letter(s) - At least one, but no more than two, non-family members should forward Form SC-3 to the address below (may also be included with application). Ideally, one should be from a teacher, professor or individual familiar with academic performance.

Item V. - Essay. Please attach a personal essay on the following topic. Please limit the essay to two pages.

Importance of Financial Education as a Part of Academic Courses

All completed applications will be evaluated and scored by the Grant Committee in February. All applicants will be notified generally before the end of February. Please return completed applications to:

Premier Community Credit Union
Attn: Marketing Department/Scholarships
3315 W. Benjamin Holt Drive
Stockton, Ca 95219



PREMIER COMMUNITY CREDIT UNION SCHOLARSHIP APPLICATION

**PLEASE PRINT CLEARLY OR TYPE ALL INFORMATION INSERTED IN FORMS
DELIVERED TO PREMIER COMMUNITY CREDIT UNION.**

Part A. Applicant Information

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

Email address for notification purposes: _____

| <u>PERSONAL DATA</u> | | | | | |
|--|----------|---|--|---|--|
| PERMANENT ADDRESS IN FULL APT., ST. NO., OR R. ROUTE: | | | BIRTHDATE / AGE | | |
| TOWN/CITY | STATE | ZIP | CELL PHONE | | |
| PRESENT MAILING ADDRESS (IF DIFFERENT FROM ABOVE): | | | SSN (Last 4 digits only) | | |
| TOWN/CITY | STATE | ZIP | HOME PHONE | | |
| FATHER'S OR GUARDIAN'S FULL NAME | | | LIVING? <input type="checkbox"/> YES <input type="checkbox"/> NO | | |
| OCCUPATION | EMPLOYER | | | | |
| MOTHER'S OR GUARDIAN'S FULL NAME | | | LIVING? <input type="checkbox"/> YES <input type="checkbox"/> NO | | |
| OCCUPATION | EMPLOYER | | | | |
| ADDRESS OF PARENT OR GUARDIAN | | | ZIP | | |
| <u>B. SCHOOL DATA</u> | | LIST ALL PRESENT AND PREVIOUS SCHOOLS YOU HAVE ATTENDED | | <u>DATES ATTENDED</u> | |
| HIGH SCHOOL | NAME | COUNSELOR'S NAME | | FROM | |
| | ADDRESS | PHONE | | TO | |
| | CITY | STATE | ZIP | YEAR GRADUATED | |
| OTHER SCHOOL / PROGRAM | NAME | COUNSELOR'S NAME | | FROM | |
| | ADDRESS | PHONE | | TO | |
| | CITY | STATE | ZIP | YEAR GRADUATED | |
| <u>C. FIELD OF STUDY</u> | | | | | |
| NAME OF (FIRST CHOICE) COLLEGE / UNIVERSITY / PROGRAM | | | | | |
| FULL ADDRESS OF COLLEGE/UNIVERSITY | | | CITY | STATE | ZIP |
| HAVE YOU BEEN ACCEPTED FOR ADMISSION? | | <input type="checkbox"/> YES | STARTING TERM. YEAR. | <input type="checkbox"/> NOT YET ACCEPTED | <input type="checkbox"/> STILL APPLYING |
| STATUS WITH COLLEGE/UNIVERSITY IF PRESENTLY ATTENDING: | | <input type="checkbox"/> FRESHMAN | | | |
| IN WHAT COURSE DO YOU PLAN TO OR CURRENTLY MAJOR AT COLLEGE? | | | DO YOU PLAN TO GO TO GRADUATE SCHOOL? | | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| WHAT PROFESSION OR VOCATION DO YOU PLAN TO FOLLOW AFTER COLLEGE? | | | | | |



PART D. OTHER PROGRAMS CONSIDERED. If you are not yet accepted to the program of your first choice (listed above), please indicate what other programs / schools you are considering.

PART E. EXTRACURRICULAR ACTIVITIES. We believe Activities round out a person's life, serve as avenues of creativity, and a means to give back to community. Please let us know your passions, involvements and accomplishments in this area, as well as Leadership positions, awards, honors, more extensive time commitment, etc. The following will serve as a guide for you, but is not meant to be inclusive. Indicate length of time involved and any specific positions held (i.e. band member for 4 years, section leader 2 years, conductor, senior year) – feel free to add an additional sheet as necessary.

| Activities - | # years | Activities | # years |
|-------------------------------------|---------|-------------------------------------|---------|
| Most clubs | _____ | Peer Counselor/Tutor | _____ |
| Choir/Orchestra/Jr. Symphony | _____ | Newspaper/yearbook | _____ |
| Band (Marching or Performance) | _____ | Junior Achievement/DECA | _____ |
| Plays/Musicals Cheerleading /Spirit | _____ | Debate/Forensics | _____ |
| Boy-Girl Scouts | _____ | Student Congress/Student Government | _____ |
| DAR Good Citizen | _____ | Science Olympiad/Quiz Bowl | _____ |
| Church/synagogue youth groups | _____ | Mock Trial/Youth in Government | _____ |

| Leadership | #years | Leadership | #years |
|--|--------|------------------------------------|--------|
| Offices other than president | _____ | All State recognition | _____ |
| Band Section leader | _____ | Drum major/Concert Master/Mistress | _____ |
| Captain of sports teams | _____ | Eagle Scout | _____ |
| Student Council or Class President | _____ | Editor of school paper/yearbook | _____ |
| District/Regional recognition (individual) | _____ | Head of community activity | _____ |
| Editor of a section of the school paper/yearbook | _____ | Lead role in play/musical | _____ |

- For college students, fill out your extracurricular activities and leadership activities on separate sheet.

Volunteer Activities-Volunteer activities (either ongoing or one time or short-term events) should be grouped together- i.e.- car wash, bread lift, blood drive, etc. Please list any volunteer activity and the number of hours spent on each activity.

| Activity and dates | #hours | Activity and dates | #hours |
|--------------------|--------|--------------------|--------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |



PART F. WORK EXPERIENCE. Please indicate below the type of work experience you have acquired. Include positions held, hours worked (i.e. 20 hrs during school year, full-time summer, etc.), supervisory positions held, self-employment, etc.). Feel free to add an additional sheet as necessary.

Summer employment- Please list all summer employment in the spaces provided and the estimated number of hours worked in the position – 12-week periods for high school seniors (240+ hours) and 15-week periods for college students (360+ hours).

| Place and dates of summer employment | Estimated summer hours worked |
|--------------------------------------|-------------------------------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

| Academic year employment and dates | Estimated academic hours worked |
|------------------------------------|---------------------------------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Non-Traditional Employment (over last 4 years, please give dates) - this would include family limitations- i.e. caring for dependent children/relatives, physical limitations, duties on farm, non-paid responsibilities.



PART G. OTHER AID. Please list all other scholarship or financial aid programs to which you have applied.

Please initial the bottom of each page. All materials must be delivered in a large envelope by the applicable due date to:
 Premier Community Credit Union
 c/o Scholarship Grant Selection Committee
 PO Box 8929
 Stockton, CA 95208

"I certify with my signature below that, to the best of my knowledge, the information provided in this application is true and correct. I understand that the scholarship for which I am applying, if awarded, will be paid directly to the institution to defer the cost of my education."

| | |
|-----------------------|------|
| APPLICANT'S SIGNATURE | DATE |
|-----------------------|------|

In the event you are selected as a scholarship recipient, your signature below authorizes the use of your name for purposes of press releases and other documents:

RELEASE AUTHORIZATION

I hereby give Premier Community Credit Union the absolute and irrevocable right and permission to release my name to the media solely for the purpose of announcing scholarship winners.

(Initial)

In addition, I authorize the use of my picture and short biographical information for inclusion in a brochure to be used as a celebratory, informational document. I understand the information used will come from the application submitted and that I may not have the opportunity to review or edit such information before publication of the brochure.

(Initial)

I hereby release and indemnify/discharge Premier Community Credit Union from any and all claims or demands arising out of or in connection with the use of photographs and personal information, as described above, including any or all claims for libel.

Applicant Signature

Guardian Signature (for minor applicants)



PREMIER COMMUNITY CREDIT UNION
EDUCATIONAL REPORT ON SCHOLARSHIP
APPLICANT

Applicant: Please sign your name on the line indicated below and take to your counselor/advisor, along with an envelope addressed to the Foundation.

Counselor/Advisor: I have applied to Premier Community Credit Union to be considered for a scholarship grant. Information about my high school performance is needed by the Scholarship Grant Selection Committee, which determines which applicants will receive scholarships. Please help me by forwarding as much of the following information as is available. An envelope is attached for your use. Thank you.

Applicant's Signature

Date

Attachments:

- Completed Educational Report on Scholarship Applicant (Form SC-2)
Copy of Grade Transcript
Merit/Selective Score
Class Rank ** of # of students
PSAT Score (Verbal and Math)
ACT Score (Comp./percentile)
EEB Score (Verbal and Math)
GRE Score
Other:

** Class rank is computed on the basis of (circle one): All subjects Academic subjects only
Grade Point Average Grading system: A = Average ACT/SAT for class =
Advances Classes: College Level AP Gifted/Talented

Counselor/Advisor: Use the space below to provide any additional information to help our Scholarship Grant Selection Committee evaluate this applicant's qualifications to receive a scholarship. Include a brief summary covering the applicant's involvement in school and related areas. Your comments will be held in strict confidence. Add additional sheet(s) if needed.

Blank lines for counselor/advisor comments.

DATE By: NAME TITLE Initial

Please return form and any additional information directly to Premier Community Credit Union, Scholarship Grant Selection Committee, P.O. Box 8929, Stockton, CA 95208. The credit union must receive this form by February 15, 2017.



**PREMIER COMMUNITY CREDIT UNION
RECOMMENDATION ON SCHOLARSHIP
APPLICANT**

Applicant: Please sign your name on the line indicated below and take to a non-family member, along with an envelope addressed to the Foundation. This individual will preferably be a faculty member or another individual active in your chosen field, although any adult, non-family member may provide the required recommendation.

Non-Family Member: I have applied to Premier Community Credit Union to receive a scholarship grant. Information about my academic experience, relevant extracurricular activities and personal standards is needed by the Scholarship Grant Selection Committee, which determines who will receive a scholarship award. Please help me by completing and forwarding this form in the envelope attached for your use. The deadline for this information is February 15, 2017. Thank you.

Applicant's Signature

Date

Use space below or attach a separate letter to provide information that would help our Scholarship Grant Selection Committee evaluate this applicant's qualifications to receive a scholarship. Include information such as that described above. Your comments will be held in strict confidence.

DATE _____ By: _____
NAME

RELATIONSHIP TO APPLICANT: _____

Please return this form directly to Premier Community Credit Union, Scholarship Grant Selection Committee, P.O. Box 8929, Stockton, CA 95208. The credit union must receive this form by **February 15, 2017.**