2019 HAWAII SCHOOLS FEDERAL CREDIT UNION SCHOLARSHIP

Hawaii Schools Federal Credit Union awards a scholarship each year to an incoming college freshman in recognition of academic excellence.

Eligibility: Each applicant must:

- 1. Be a member of Hawaii Schools Federal Credit Union before the submission deadline;
- 2. Graduate from high school in 2019;
- 3. Be entering his/her freshman year in an accredited college or university located in the United States:
- 4. Have maintained a grade point average (GPA) of 3.0 or better;
- 5. Have a scholastic record of intellectual promise;
- 6. Submit a completed application.

Amount: \$1,000

Submission Deadline:

Postmarked no later than February 15, 2019

Submission: Scholarship Committee

Hawaii Schools Federal Credit Union

233 Vineyard Street

Honolulu, Hawaii 96813-2446

Required materials:

- 1. A completed application, including:
 - a. An essay about your desire to receive the Scholarship.
 - b. An official transcript of grades from last school attended;
 - c. A High School Background Report
- 2. Two (2) completed recommendation forms.

Payment: Scholarship proceeds will be made payable to the university or college on behalf of the student

upon acceptance of enrollment.

Selection: The scholarship committee will thoroughly examine all completed applications submitted by the deadline and will determine the applicant's standing. The Scholarship Committee will award

one scholarship to the applicant deemed most deserving.

INSTRUCTIONS & CHECKLST

1.	Complete your Scholarship Application.
2.	Have your parent/guardian sign your Scholarship Application, acknowledging your submission.
3.	Write an essay, not to exceed 1000 words, explaining how the scholarship will help you.
4.	Have your high school complete the High School Background including scores from your Scholastic Aptitude Test (SAT) or American College Test (ACT).
5.	Provide an official copy of your high school transcript.
6.	Have two people fill out and independently return one Recommendation Form each by the due date.
7.	Mail your completed application, with all supporting documentation to Scholarship Committee, Hawaii Schools Federal Credit Union, 233 Vineyard Street, Honolulu, HI 96813, in one envelope postmarked no later than February 15, 2019 .

PLEASE DO NOT LEAVE THIS RESPONSIBILITY IN THE HANDS OF YOUR HIGH SCHOOL.

APPLICATION (Completed by applicant)						
(Please Print/Type)	` 1	,				
Last Name	First		Middle			
Street Address						
City	State	Zip Phone				
Hawaii Schools FCU Ac	count #		High School			
Date of Birth	Social Secur	rity Number Graduati	on Date			
In what high school activ	vities did you participate?					
List any offices held or h	nonors received:					
List any academic honor	s received:					
Attach letter of universit	y or college acceptance. If unavailable	le, list universities or colleges that are review	ring your application(s):			
Attach 1,000 word es	say. (See instructions for conte	nt)				
Applicant's Signatur	·e	Date				
Parent/Guardian Sig	gnature					

HIGH SCHOOL BACKGROUND (Completed by high school representative) Applicant's Name Please complete and return this form to the applicant in time for a **February 16, 2018** postmark deadline. (Please Print/Type) Name of School Street Address City State Zip Name of Principal _____ Who is rating the student? Name _____ (e.g. principal, teacher, counselor) Length of relationship _____ Relationship _____ What is your general evaluation of this student? Sometimes special circumstances should be considered when evaluating a student's achievement record and test scores. Please explain if there are any. Other comments:-Please indicate the following: Scholastic Aptitude Tests (SAT) American College Test (ACT) Class Ranking _____ Please attach a transcript of the student's grades. Include an explanation of the marking system used. Signature of Principal / Rater Date

	RE	COMMEN	DATI	ON FO	RM		
		(Completed	by a third	party)			
Applicant's l	Name						
candidly com	med applicant is applying for plete and return this recomm Committee, Hawaii Schools l	nendation indeper	ndently po	stmarked n	o later than	February 15	5, 2019 to:
(Please Print/T	Type)						
	applicant on the following qual	itias by abaaking t	ha annranri	oto bovi			
riease rate the	applicant on the following qual	ittles by checking the		ate box:	n.,	N. D. J. C.	
		Outstanding	Above Average	Average	Below Average	No Basis for Opinion	
	Intellectual Capacity						
	Motivation and Drive						
	Initiative						
	Character						
	Leadership						
	Scholastic Ability						
	Writing Ability						
	Speaking Ability						
Comments:							
Comments							
Describe what	you feel are the Applicant's ov	erall strengths and/	or weaknes	sses.			
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Years known ii	this capacity						
Signature				Date			
Name							
Street Address							
					Phone		
City	S	tate	7	Zip			

	RE	COMMEN (Completed			RM		
Applicant's N	Name						
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(Please Print/T	ype)						
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		Outstanding	Above	Average	Below	No Basis for	
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	Motivation and Drive						-
	Initiative						
	Character						
	Leadership						
	Scholastic Ability						
	Writing Ability						
	Speaking Ability						
	~Fy						I
Comments:							
Describe what y	you feel are the applicant's over	erall strengths and/o	or weaknes	ses			
What is your rel	lationship to the applicant?						
Years known in	the capacity						
Signature				Date			
Signature				Date			
Name							
Street Address							
Sheet Address					D1		
City	S	State	7	Zip	rnone		