MERHO Federal Credit Union is offering a scholarship award of \$1000 for the 2019-2020 academic school year. The recipient will be selected based upon financial need, academic achievement, essay, and personal interview.

To be eligible:

- Applicant must currently be a MERHO Federal Credit Union member as of January 1, 2019.
- Undergraduate applicants who will be a freshman in the upcoming academic year must have a SAT score of 900 (does not include essay).
- Undergraduate applicants who are beyond their freshman year in the upcoming academic year must have a total GPA of 2.5 or greater.
- Graduate applicants must have a total GPA of 3.5 or greater.

In order to be considered for this scholarship, the APPLACANT must submit the complete application packet including all REQUIRED documents to the MERHO Federal Credit Union Office no later than July 1, 2019. Late or incomplete applications will not be considered.

Use the check boxes to assure you have gathered the required documentation:

- □ Completed Application form completed by applicant
- □ Completed Financial Need form completed by school financial aid officer.
- OFFICIAL transcripts of academic records with the latest grading period and cumulative GPA. Submit in sealed envelope from school (no copies or faxes will be accepted).
- □ Copy of SAT test scores.
- Essay of no more than one page describing your personal history, career goals, and most importantly, how this monetary award will help you achieve your career goals.
- Two letters of character references, one from a current faculty member and one that is work related, if possible. Family members or relatives cannot give references. Please include mailing addresses and phone numbers of references. References may be contacted if applicant is a finalist.

A student is eligible to reapply for this scholarship as long as need and academic standing are maintained. Prior recipients of full scholarships are ineligible to reapply.

For more information or to ask questions, call the MERHO Federal Credit Union office at 814-535-3116 and ask for Karen Walker.

Please mail or deliver your application packet to:

MERHO Federal Credit Union 15 Irene Street Johnstown, PA 15905

APPLICANT DAT	<u>A</u> (type or pri	nt legibly)					
FULL NAME		st, middle, la					
ADDRESS	(fir	st, middle, la	ast) 				
CITY							
TELEPHONE: HC	HOME CELL						
ACADEMIC ACHI	<u>EVEMENT</u>						
NOTES:							
1. Please do (not applic	not leave any cable).	/ questions u	ınanswered	. If question	on does not a	apply, write	"N/A"
2. If more sp	ace is needed	d to thorough	ıly answer a	question,	attach a sep	arate shee	t of paper.
Name of current ed	ducational pro	ogram:					
Name of College/L	Jniversity/Prof	essional Sch	nool/2 year	Technical S	School:		_
Address of School	:						-
Length of Program	:						_
Number of years a Six	Iready comple	eted: Zero_	One	_ Two	_ Three	_ Four	Five
Number of credits	earned:	_ Cum GP	A: E	xpected gr	aduation dat	te:	
Number of years re	emaining to co	omplete the p	orogram:				
What professional	goals do you	plan to achie	eve when yo	ou earn you	ır degree/dip	oloma/certif	icate?

		High School				
School		Tilgit Gottool				
Address						
Years attended	to	Cum GPA				
	Previou	us Post High School Education:				
School						
Address						
Years attended	to	Cum GPA				
School						
Address						
Years attended	to	Cum GPA				
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Address						
Address Years attended	to	Cum GPA				
Tours alleriada						
Other relevant information:						
EMPLOYMENT HISTORY						
Current Employment:						
• •						
Position and responsibilities						
Date began employment						
Average number of hours w	orked/week					
Past Employment:						
Position held		to				
Reason for leaving						
<u>COMMUNITY VOLUNTEERISM</u> (Describe ways that you volunteer)						

HONORS AND AWARDS RECEIVED
FINANCIAL NEED Give the attached FINANCIAL NEED FORM to the financial officer at your school to complete for you. Submit the completed form with your scholarship application.
ESSAY Enclose your essay with your scholarship application.
Signatura

Financial Aid Need Form

To the applicant: Please give this form to your program's financial aid officer to complete and return to you to be included in your scholarship application packet. To the financial aid officer: ______ is submitting an application for the MERHO Federal Credit Union Clyde Mintmier Memorial Scholarship and needs you to complete this form. Thank you for your help in defining this applicant's financial status/need. 1. Total cost of attendance for current academic year; Estimate: year tuition/ fees _____ books _____ transportation _____ room _____ miscellaneous 2. Number of dependents the student has in his/her household: _ 3. Has the student completed a FAFSA form? □ Yes □ No 4. Total estimated family contribution on (EFC): 5. Total estimated self contribution from employment: 6. Is the student:

dependent independent 7. Is the student a United States citizen? ☐ Yes ☐ No 8. Outstanding debt for previous education: 9. Outstanding debt for current education: 10. Amount of other scholarships and grants earned for the current year: ______ 11. Estimate of financial need to support tuition, academic fees and additional expenses □ high □ moderate □ low □ no need very high Any additional information related to financial need for the Committee to consider for scholarship eligibility: Name of program of study: Name of educational facility: Address of educational facility: Financial aid officer Phone number: _____ E-mail address: _____ Signature: _____ Date: _____