



Judith A. Lowe Memorial Scholarship Application

Please complete and return by March 10th, 2018

Section I – General Information

Name: _____

Gateway Metro account number: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: (_____) _____ Birth Date (MM/DD/YYYY): ____/____/____

Name(s) of parent(s) or legal guardian(s):

Current High School: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: (_____) _____ Month/Year graduated (anticipated): _____

Grade Point Average: _____ **(Please include one copy of your most recent report card)**

College or Trade School You Plan to Attend:

City: _____ State: _____ Degree You Plan to Pursue: _____

Career You Plan to Pursue When You Graduate: _____

Section II – Activities

(Honors & Awards, Extra-curricular Activities, Community/Volunteer Activities, & Employment)

Name: _____

Current High School: _____

Honors & Awards	Explanation	Dates

Extra-Curricular School Activities	Hrs/Week	Title or Position	Dates

Community/Volunteer Activities	Hrs/Week	Title or Position	Dates

Employment	Hrs/Week	Duties	Dates

Section III – Video Essay

Please complete a 3-6 minute video essay on this year’s topic – **“How Can Credit Unions Help Your Generation”** In this video please explain what credit unions do and how they help their community and the people they serve. Creativity is an important aspect of the video and will be judged accordingly. Please upload your video to YouTube and submit a link to the video with your application.

Section IV – Letters of Recommendation

Please include **two letters of recommendation**: One from a teacher or counselor and one from a sponsor, employer, coach, etc. (sponsor may be someone who has directly and actively led an extracurricular activity or organization in which the applicant has participated). Parents, relatives and/or legal guardians are not eligible to submit a letter of recommendation.

Media Release and Statement Accuracy

If chosen to receive a Judith A. Lowe Memorial Scholarship, I agree to have my photo and name used in Gateway Metro Federal Credit Union publications. I understand that my name and photo will be sent to local media outlets and may be used in newspapers, online publications, social media, etc.

I hereby certify that the information provided in this application is true and accurate to the best of my knowledge.

Applicant Signature: _____ Date Signed: _____

*Parent/ Guardian Signature: _____ Date Signed: _____

*If applicant is under the age of 18 at time of application