



## Judith A. Lowe Memorial Scholarship Application

Please complete and return by March 16<sup>th</sup>, 2019

### 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 a Lack of Financial Literacy Impact Your Generation and How Do Credit Unions Help”** In this video please explain the impact the lack of financial literacy can put on individuals or families and 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 understand that the winning video becomes property of Gateway Metro Federal Credit Union with attribution to its creator.

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