



WOBURN MUNICIPAL

FEDERAL CREDIT UNION

8 Cedar Street Woburn, Massachusetts 01801

www.wmfcu.org

781-933-2600

SCHOLARSHIP APPLICATION

complete this application and mail to:

**Chairman Scholarship Fund
Woburn Municipal FCU #17847
8 Cedar Street
Woburn, MA 01801**

**** ELIGIBILITY: GRADUATE HIGH SCHOOL SENIOR AND CREDIT UNION MEMBER ****

This application must be filled out and returned to the credit union by **March 31, 2018**

Name: _____

Address: _____

Telephone: _____ Date of Birth: _____

Credit Union Account Number _____

Name and Address of school you plan to attend:

Name: _____

Address: _____

Have you been accepted? _____ Major Course of Studies _____

STUDENT INFORMATION

Name and address of secondary school graduated from:

Name: _____

Address: _____

List all extra-curricular activities in and out of school:

List all academic awards you have received:

Rank in class: _____ Total Number in class: _____

PARENT/GUARDIAN INFORMATION

FATHER:

Name of Father or Guardian (indicate relationship) _____

Address: _____

Occupation: _____

Employer: _____

Annual Gross Income: \$ _____

MOTHER:

Name of Mother or Guardian (indicate relationship) _____

Address: _____

Occupation: _____

Employer: _____

Annual Gross Income: \$ _____

GENERAL INFORMATION

List the **name**, **school**, **grade**, and **tuition** of any brother or sister attending college:

1. _____
2. _____
3. _____
4. _____

List the **name**, and **ages** of any younger brothers or sisters:

- | | |
|----------|----------|
| 1. _____ | 3. _____ |
| 2. _____ | 4. _____ |

Have you been granted any scholarship aid? _____

If so, give details _____

Have you reason to expect scholarship aid from any other sources? _____

If so, give details _____

WORK EXPERIENCE

List all full and part-time work you have done during your high school career:

<u>DATES WORKED</u>	<u>JOB</u>	<u>AMOUNT EARNED</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Estimated amount of savings that you have: \$ _____

ESTIMATED EXPENSES

List a breakdown of the estimated expenses for the freshman year of study including:

TUITION _____ ROOM AND BOARD _____ BOOKS _____

I will be living at school _____

I will not be living at school _____

IN THE SPACE BELOW, EXPLAIN WHY YOU HAVE DECIDED TO APPLY FOR THIS SCHOLARSHIP. *(If additional space is needed, please attach a separate sheet)*

APPLICANT:

This application **must** include:

1. Verified transcript from secondary school
2. Copy of acceptance letter from your chosen college/university
3. Applicants credit union account number _____

Applicant agrees to notify Woburn Municipal Federal Credit Union in writing when your undergraduate degree is completed or withdrawal is made.

DATE: _____ APPLICANTS SIGNATURE: _____