

HEALTHSHARE CREDIT UNION SCHOLARSHIP FOR HIGH SCHOOL SENIORS

Thank you for your interest in the HealthShare Credit Union Scholarship Program. We are offering 4 financial scholarships of \$1,000 each to deserving seniors in area high schools who have decided to pursue higher education in an accredited two- or four-year post-secondary institution.

Eligibility: The applicant must be a member and have their own account with HealthShare Credit Union and be a high school senior. The applicant must have a cumulative grade point average of at least 3.0, and he/she must expect to be enrolled as a full-time undergraduate student in an accredited college or university (two- or four-year program) during the coming school year.

Application process: Applicants will be evaluated by the HealthShare Credit Union Scholarship Program selection committee based on the following criteria:

- Letter of recommendation. Your application packet should include a letter of recommendation from a teacher (past or present).
- Demonstrated academic ability. You must submit your most current NC high school transcript, including GPA (a minimum GPA of 3.0 is required). A photocopy is acceptable.
- Demonstrated writing ability. You should submit an original essay on the topic listed in the application.
- School activities. List all school activities in which you have been involved and be sure to list any leadership positions held. Explain which activity was most important to you and why.
- Community activities: List all community activities you have been involved in and leadership positions. Explain which activity was most important to you and why.

Once the application is completed and signed, send all requested items (application, transcript, letter of recommendation and essay) together in one package. Applications will not receive consideration if incomplete, if documentation is missing, or if documentation arrives in separate mailings.

The application and requested documentation must be received no later than December 31, 2018 in our office at The Moses H. Cone Memorial Hospital, 1200 N. Elm Street, Greensboro, NC 27401. You will be notified on or before March 18th, 2019 if you have won a scholarship. You will be expected to attend the annual meeting of the Credit Union March 2019, where you will be recognized.

Non-winners will not be notified.

If you have questions, contact: Genice DeCorte at genice.decorte@conehealth.com or by calling (336) 832-8206.

*Scholarship is not open to HSCU directors, volunteers and their immediate families.

Which of these school activities were most important to you? Explain why:

Community Activities

List the most important activities, your level of participation and leadership roles (attach an additional sheet if needed).

Activity/Club	Level of Participation	Role in Group

Which of these community activities was most important to you? Explain why:

Employment Experience

List all past job experience, including self-employment (attach an additional sheet if needed).

Job and Employer	Dates	Hours per Week

Attach Essay

Please write an essay – not to exceed 500 words – on the subject: **What products and services do you want from your financial institution and what can your financial institution do to help you achieve your financial goals throughout your life?**

Please type your essay on one side of an 8 ½ x 11 sheet of paper to ensure legibility. Spelling and grammar will be considered in judging. Creativity is highly encouraged. Handwritten applications will not be considered.

Statement of Certification

All the information provided by me is true and complete to the best of my knowledge. I agree to give proof of the information supplied on this form, if required. My signature certifies that all the information is complete, factually correct and honestly represented. Falsification of information on this application could jeopardize any assistance offered. The applicant understands that the essay and form become the property of the HealthShare Credit Union.

Signature of Applicant _____ Date _____

I hereby affirm that I intend to enter an accredited school of higher education. I understand that no scholarship funds shall be transmitted to any educational institution until there is notification from the Registrar of the college or university in which I am enrolled. Additionally, I hereby grant permission for the use of my name and information contained in my application in any future publicity for the scholarship and agree to attend the credit union's annual meeting March 2019.

Signature of Applicant _____ Date _____

Selection

A selection committee composed of members of the HealthShare Credit Union Board of Directors will select the scholarship winners. The decision of the committee will be final and is not subject to review.

The final decision on the selection will be based on the applicant's creativity in the essay, grammar, spelling and completion of the application form. The committee also will consider the applicant's noteworthy achievements, honors received, involvement in community activities, community or school memberships and extracurricular activities.

A member of the scholarship selection committee will notify the scholarship winners of the award and also notify the high schools from which they are graduating.

A list of the scholarship winners will be posted on the HealthShare Credit Union (www.healthsharecu.org) website after the judging process is complete and winners have been notified.

Deadline

All applications must be completed and postmarked/hand-delivered by December 31, 2018 for consideration. Scholarship applications postmarked after this date will not be considered. Do not fax or email your application.

Mail applications to:

Genice DeCorte
HealthShare Credit Union
The Moses H. Cone Memorial Hospital
1200 N. Elm Street
Greensboro, NC 27401

The application and related documents must be submitted **together in one package**. Applications that are incomplete, unsigned or lacking requested documentation, will not receive scholarship consideration.