Beaver Valley Chapter of Credit Unions Scholarship Application

Please type or print

Last Name	First Name City	Middle	
Address		State	Zip
Phone Number	Birth Date	Last four digits	of Social Security Number
Name of the Credit Union you are a member of		C.U. Account Number	
Name of High School/Coll	ege most recently attended		· .
Name of accredited educa	tional institution you will be attending in the	e Fall of 2024.	
Type of Institution (check	one)		
O An	accredited two-year degree program		
O An	accredited four-year institution (undergrac	uate program)	
O: A fu	ull-time job preparatory program at an acc	redited trade or technica	al school
Anticipated or established	major/course of study		
Signature			Date
Doors officely the fellowing	n ha var a mulii aki a a		
Please attach the following		- H (
) An official copy of your high school or c	•	
2) A list and description of participation in a	any activities (school or	community)

- 3) A statement of your personal goals.
- 4) An essay (500 words or less) on:

The importance of financial literacy in schools

5) A copy of the acceptance letter from an accredited school