

TYPE OR PRINT CLEARLY ALL INFORMATION EXCEPT SIGNATURES Application **MUST** be received by
 Completeness and neatness ensure your application will be reviewed properly. **MAY 27, 2022**

APPLICANT

Last Name	First Name	Middle Initial	
Permanent Mailing Address			Apartment #
City	County	State	Zip Code
Telephone ()	Date of Birth: Month	Day	Year
Email Address		Member #	
Please indicate your status (for statistical purposes only):			
		Male	Female

PARENT OR GUARDIAN INFORMATION (Required if applicant is under 18)

Last Name	First Name	Middle Initial	
Permanent Mailing Address			Apartment #
City	County	State	Zip Code
Day Telephone ()	Relationship to Applicant		

HIGH SCHOOL

School Name	Graduation Date (MM/YY): / /	Telephone ()	
City	County	State	Zip Code

POSTSECONDARY SCHOOL Name of the postsecondary school you plan to attend. (If unknown, please list in order of preference the schools to which you have applied) Use official school names. Do not use abbreviations.

School Name	City	State
School Name	City	State
4 Year College or University	2 Year Community or Junior College	Vocational-Technical School
Other (explain):		
Degree: Bachelor	Associate	Certificate Other (explain):

IMPORTANT NOTES

Sending a resume does not replace any part of this application. If space provided in any section is inadequate, you may continue on additional sheets. Attachments must follow the same format. Your name, address, and the name of this scholarship program should be included on all attachments.

COMMUNITY VOLUNTEER EXPERIENCE Describe your UNPAID work experience during the past four years (e.g. Hospital volunteer, Project Homeless Connect, food bank, etc.).

Organization _____ Services They Provide _____

Start Date _____ End Date _____ Hour Per Week _____

Your Duties _____

Organization _____ Services They Provide _____

Start Date _____ End Date _____ Hour Per Week _____

Your Duties _____

Add Additional information on supplemental sheets

SCHOLASTIC ACTIVITIES Describe all school activities in which you participated in school during the past four years (e.g. Debate Team, Chorus, Student Government, Football, etc.).

Name of Club or Activity _____ Description _____

Offices Held (if applicable) _____ Number of Years Participated _____

Name of Club or Activity _____ Description _____

Offices Held (if applicable) _____ Number of Years Participated _____

Add Additional information on supplemental sheets

LIST HOBBIES AND INTERESTS

Add Additional information on supplemental sheets

AWARDS AND HONORS List any special awards or honors you received any time during your high school career, and designate whether this was given from your school or another organization.

Add Additional information on supplemental sheets

GOALS AND ASPIRATIONS Please describe in detail your career and long-term goals after college.

Add Additional information on supplemental sheets

EXPLAIN HOW BEING A YOUTH MEMBER OF SAN FRANCISCO FEDERAL CREDIT UNION HAS ENHANCED YOUR FINANCIAL EDUCATION AND KNOWLEDGE. (Essay or video submission accepted.)

Add Additional information on supplemental sheets

APPLICANT APPRAISAL

To the Applicant: If this section is incomplete, your application will not be evaluated. The section is to be completed by a high school counselor or advisor, an instructor, or a work supervisor who knows you well.

To the Adult Appraiser: You have been asked to provide information in support of this application. Please give immediate and serious attention to the following statements. When complete, please return to applicant. If you prefer, photocopy this section and return to applicant in a sealed envelope. A letter of recommendation does not replace this section.

The applicant's choice of a postsecondary education program is:	Extremely Appropriate	Very appropriate	Moderately Appropriate	Inappropriate
The applicant's achievements reflect his/her ability:	Excellent	Very Well	Moderately Well	Not Well
The applicant's ability to set realistic and obtainable goals is:	Excellent	Good	Fair	Poor
The quality of the applicant's commitment to school and/or community is:	Excellent	Good	Fair	Poor
The applicant is able to seek, find, and use learning resources:	Excellent	Very Well	Moderately Well	Not Well
The applicant demonstrates curiosity and initiative:	Excellent	Very Well	Moderately Well	Not Well
The applicant demonstrates good problem-solving skills, follows through, and completes tasks:	Excellent	Very Well	Moderately Well	Not Well
The applicant's respect for self and others is:	Excellent	Very Well	Moderately Well	Not Well

COMMENTS

Appraiser's name	Title	Telephone ()
Signature	Organization	Date

TRANSCRIPT INFORMATION All applicants **must** submit official high school transcript of grades and have this section completed by the appropriate school official. (A clear explanation of the school's grading scale must also be submitted.)

Applicant ranks in a class of	Cumulative Grade Point Average		SAT			ACT				
	Weighted	/4.0 scale	Critical Reading	Math	Writing	English	Math	Reading	Science	Composite
	Unweighted	/4.0 scale								

School Official's Signature	Title	Telephone ()		
Address	City	County	State	Zip

APPLICATION CHECKLIST The student is responsible for submitting all materials on time. Incomplete applications will not be evaluated. This application becomes complete and valid only when all of the following materials have been received:

- Student Application with complete Application Appraisal
- Current Complete Transcript(s) of Grades (including grading scale)

All materials, including transcript, must be addressed to or provided as an attachment and emailed to **Scholarship@SanFranciscoFCU.com** or mailed to: San Francisco Federal CU Youth Scholarship Program, 770 Golden Gate Ave., San Francisco, CA 94102. **APPLICATIONS MUST BE RECEIVED BY MAY 27, 2022.**

CERTIFICATION San Francisco Federal Credit Union has the sole responsibility for selecting recipients based on criteria as set forth in the program's description. This application becomes the property of San Francisco Federal Credit Union. (It is recommended you keep a copy for your files).

I acknowledge decisions are final. I certify I meet eligibility requirements of the program as described in the guidelines and the information provided is complete and accurate to the best of my knowledge. If selected, San Francisco Federal Credit Union may use my name and likeness in their communications. Falsification of information may result in termination of any award granted.

Applicant's Signature	Date
Parent's Signature (if applicant is under 18)	Date