

2018 Cheri Kennedy Child Daycare Scholarship Award

This scholarship application is available for a single working parent, enrolled in a college, university or vocational school with at least 8 credit hours per quarter. Please see page one of the application for a complete list of eligibility requirements.

Additional copies of this application may be printed from the TwinStar CU website: www.twinstarcu.com.

Please contact Devin Boyd at 360-923-4587 or 800-258-3115 ext. 4587 for further information.

Completed applications may be turned in at any TwinStar CU branch or mailed to:

TwinStar Credit Union

Attn: Devin Boyd

PO Box 718

Olympia WA 98507-0718



CHERI KENNEDY CHILD DAYCARE SCHOLARSHIP APPLICATION

The following requirements must be met in order for the applicant to be considered. If the application (pages 1-5) is not completed in its entirety, it will be determined ineligible.

■ Applicant must be a member of the property of the proper	per in good standing with TwinSta	ar Credit Union.
☐ Applicant must be a single	working parent.	
□ All application questions m	nust be answered completely.	
Applicant must be enrolled per quarter.	I in a college, university or vocation	onal school with <u>at least 8 credit hours</u>
☐ Applicant must attach proc	of of enrollment in an institution of	higher education.
Application must b	e received or postmarked	no later than June 1, 2018
ALL INFORMATI	ON WILL BE KEPT STRIC	TLY CONFIDENTIAL
NAME:		
(First)	(Middle Initial)	(Last)
ADDRESS:		
PHONE:		
ACCOUNT NUMBER:		
NAME OF COLLEGE/UNIVERSI	TY:	
STATE OF COLLEGE:		
HOW MANY CHILDREN AND AC	GE(S):	
I CERTIFY THIS APPLICATIO	N IS COMPLETE AND ACCURATE TO	O THE BEST OF MY KNOWLEDGE.
Applicant's Signat	ure	Date
		For TwinStar Use
		Code:

For TwinStar Use
Code:

FINANCIAL INFORMATION

APPLICANT'S TOTAL HOUSEHOLD 2017 ADJUSTED GROSS INCOME \$
NUMBER OF APPLICANT'S DEPENDENTS (INCLUDING YOURSELF)
FINANCIAL NEED (Describe, in detail, your financial need for the award.)

For TwinStar Use
Code:

PLEASE NOTE THE LEVEL OF SCHOOLING YOU HAVE COMPLETED AND THE DEGREE YOU ARE PURSUING.
PLEASE LIST ANY COMMUNITY SERVICE EVENTS YOU HAVE PARTICIPATED IN.

For TwinStar Use
Code:

WORK EXPERIENCE AND EDUCATIONAL GOALS

WORK EXPERIENCE

(If you do not have work experience, please state so in the POSITION/DUTIES column.)

EMPLOYER	POSITION/DUTIES	FROM	то	TOTAL EARNED (NOT RATE)
	ur future education, and the reasons yo	34 31.00011 till0		

For TwinStar Use
Code:

ADDITIONAL INFORMATION/EXPLANATION

Describe any circumstances you would like considered by the Committee challenges in your life?	e. Do you have any specific

For TwinStar Use
Code:

IMPORTANT

If you are selected to receive the scholarship, we would like to recognize your accomplishment by including your name and photo in the credit union newsletter.

Please include this signed authorization form and a photo of yourself with your completed application. If you are selected to receive a scholarship and have not submitted a photo with this application, your name will be included in the newsletter without a photo.

Photos received by TwinStar Credit Union become the property of the credit union and will not be returned to the applicant.

(Please note: A photo is <u>not</u> required to be considered for a scholarship.)

I authorize TwinStar	r Credit Union to	publish the	attached	photo of	myself in a	a future [•]	TwinStar	Credit
Union newsletter.								

Signature	Date	
Print Name	Date	

Good luck!

Don't forget to sign above and enclose your photo!