

# 3<sup>rd</sup> Annual Kaua`i Community College Scholarship Program

Top Five Candidates Will Receive a \$1,000 Scholarship

# **Eligibility**

#### **Applicant must:**

- Be a resident of Kaua`i.
- Be a member, or a child/grandchild of a member, or be eligible to become a member.
   (For eligibility requirements visit our website @ www.kgefcu.org. Verification of eligibility is required.)
- Show proof of acceptance to Kaua'i Community College as a full-time student.

### **Judging Criteria**

#### Financial Need

Provide a Financial Aid Form, Parents 2013 Federal Tax Return or Personal 2013 tax return (if no longer a dependant) must be submitted with this application to avoid disqualification.

#### **Scholastic**

Students must have maintained at least a 3.0 grade point average and submit a current official transcript with this application.

#### Academic Achievements and Leadership

Honors, extra-curricular activities such as student government, sports, various committees, organizations, and school sanctioned clubs.

#### Community Service

Non-Profit organizations, part-time employment, volunteer work, etc.

#### Two Letters of Recommendations

Letters from teachers, employers, clergy or any non-related individuals who can attest to the applicant's character and potential.

#### Essay or Personal Statement

Submit an essay or personal statement of at least 200 words on why you are applying for one of five Kaua`i Government Employees Federal Credit Union scholarship.

# "Together, We Make It Happen"

Deadline to submit application is March 31, 2015. Scholarship winners will be notified in May by mail. Applications, essays, letters of recommendation, and other supporting documents can be e-mailed to <a href="mailto:lisa@kgefcu.org">lisa@kgefcu.org</a> or faxed to: 855-2548.



### KAUA'I COMMUNITY COLLEGE OFFICIAL SCHOLARSHIP APPLICATION

Please type or print (Application must be complete)

Name		Phone	Date of Birth
(Last) (First)	(MI)		
Address	City		StateZip
(Street)			
Parent or Guardian's Name			Phone
(Last)		(First)	
Counselor's Name			Phone
Course of Study:			
Are you a member?Is one	of your Parents	/Grandparo	ents or Guardian a member?
Members Name:			Relationship:
College Courses:			
	ge, and a Finan	cial Aid Fo	dation, current official transcripts, proof orm, a copy of your parents 2013 Federal t) to:
Mail: Scholarship Program Kaua`i Government Employees FCU P.O. Box 711 Lihue, HI 96766	E-Mail: lisa@kgefcu.c	org	<u>Fax:</u> (808) 855-2548
	Employees FCU Scl	holarship au	`i Government Employees FCU and will not be atomatically gives Kaua`i Government Employees ecipients.
(Deadline to submit application is Ma I certify that all records and information	·	•	inners will be notified by mail in May) and accurate.

Date

**Applicants Signature** 

### **COLLEGE ACTIVITIES AND PARTICIPATION LIST**

# Check the year and list all organizations and activities

<u>Honors</u>	1	2	3	4
Honor Roll				
President's List				
National Honor Society				
Holomua Honor Society				
Other:				
<b>Student Government</b>				
President				
Vice President				
Treasurer				
Secretary				
Representative				
Clubs				
<u>Committees</u>				

Community Activities/Service	1	2	3	4
<u>Other</u>				

**Comments:** 

### **ESSAY OR PERSONAL STATEMENT**

	Kaua`i Government Employees FCU scholarship. (Must be typewritten)
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