SEVEN SEVENTEEN
credit union

KENT STATE UNIVERSITY
Scholarship Application

NAME: _____ Social Security #: _____

Home Address: _____ Seven Seventeen Acct #: _____

City, State, Zip Code: _____

Relationship of Applicant to Seven Seventeen Member: _____

Home Phone: _____ Cell Phone: _____

High School: _____ Date of Graduation: _____

Date Financial Aid Filed: _____ Anticipated Major: _____

On a typed, separate sheet of paper please:

1. List your community and/ or school activities and awards plus any employment history

2. Tell us what you plan to do upon completing your education

GENERAL REQUIREMENTS FOR SCHOLARSHIP:

1. The student must be a member or a child of a member of Seven Seventeen Credit Union, Inc.
2. The student must be a senior graduating from high school the current year.
3. The student must be a full time student at Kent State University the fall semester following high school graduation.
4. The student must have at least a 3.00 grade point average on a scale of 4.0. (Please attach a grade transcript from your guidance office verifying GPA.)
5. The student MUST provide 2 letters of recommendation.
6. The scholarship will be granted without regard to sex, race, or creed.
7. **The scholarship will be paid directly to Kent State University for the student. One half of the scholarship will be paid for the fall semester and one half for the spring semester.** It will be used for tuition, fees, and book expenses.
8. The scholarship is not renewable.

I certify that this information is complete and correct to the best of my knowledge:

_____   _____
SIGNATURE OF APPLICANT   DATE

Return completed application with requested attachments to any
Seven Seventeen Office **no later than MARCH 1st.**

As of Sept 2013