



Post Graduate Studies Scholarship Award Application Form

To: Administrators
Department Heads

From: Scholarship Committee
Patricia Leary, Chair
Donald O. Sandridge, Co-Chair

Date: December 2011

Subject: Official Application Form and Information

The Post Graduate Studies Scholarship Award was established in 2006 by the Hampton Roads Educators' Credit Union to encourage teachers and other school employees to pursue higher levels of education. We will award 1 scholarship this year in the amount of \$1,500.00. The award will go to a teacher or employee who is pursuing a Master's degree or higher.

Applicants must be a member of our Hampton Roads Educators' Credit Union and work in one of the school systems in our field of membership.

Please inform any interested, eligible applicants about our scholarships. Regulations that govern this award are also included.

COMPLETED APPLICATIONS SHOULD BE SUBMITTED ONE OF THE FOLLOING WAYS:

FAX to Patricia Leary, at (757) 838-0776

E-mail (AS A PDF FILE) to hrecu@hrecu.org

OR

MAIL to Patricia Leary, 2130 Cunningham Dr., Hampton, VA 23666

Completed Applications Must Be Received By Midnight February 24, 2012

PLEASE REPRODUCE COPIES OF THE ENCLOSED APPLICATION FORM, AS NEEDED

REGULATIONS GOVERNING THIS SCHOLARSHIP

Applicant must:

Be a candidate for a Master's degree or higher and have outstanding character traits, citizenship, scholarship and leadership qualities.

Hold a genuine desire to further their career in the field of education within the Virginia public or private school system as evidenced by:

- 1). Providing the name of the public or private college he/she plans to attend that has a recognized program in education and/or related fields.
- 2). Recommendation by his/her immediate supervisor.

FINANCIAL CONSIDERATIONS:

- 1). There will be one scholarship offered in the amount of \$1,500.00.
- 2). The scholarship shall be paid directly to the college in which the student enrolls, **no later than October 31st of the year the scholarship is awarded**, by the treasurer of the Hampton Roads Educators' Credit Union.
- 3). If the recipient withdraws from college this note shall be payable with interest to the treasurer of Hampton Roads Educators' Credit Union and be due one year from the date of such college withdrawal. PLEASE NOTE: In hardship cases the Credit Union Board of Directors may extend this time of re-payment or authorize cancellation of the entire obligation to repay this scholarship amount.

Applicant:

The application will not be complete unless it includes the most recent transcript from the institution where you completed your highest level of education or where you are currently enrolled.

Scholarship Committee:

The HRECU Scholarship Committee will review all applications and select recipients for the scholarship(s) as offered. The recipient(s) will be notified in writing of their award. Incomplete application packets will be considered ineligible by the Scholarship Committee. Decisions made by the Scholarship Committee are final. All information will be kept confidential.

Names of the recipients shall be announced at the Annual Meeting of the HRECU on Thursday, March 15th at 6:00pm. These names shall also be published in the Credit Union Newsletter.

Completed application packet MUST be received by MIDNIGHT, FEBRUARY 24, 2012.

***DEADLINE INFORMATION**

BY February 24, 2012 – Mail or Fax to: **Patricia W. Leary**
C/O HRECU
2130 Cunningham Dr.
Hampton, VA 23666
Fax #: (757) 838-0776

Or E-MAIL as a .pdf file to hrecu@hrecu.org

PLEASE TYPE OR PRINT CLEARLY!

You must be a member in good standing of Hampton Roads Educators' Credit Union, Inc. for your application to be accepted. Please provide us with your account information:

Member Acct. # _____ (required)

Member Name: _____

APPLICANT INFORMATION

Last Name: _____ First Name: _____ MI: _____

Social Security No. : _____ Date of Birth: _____

Street Address _____ APT # _____

City _____ State: _____ Zip Code _____

Home Phone: (_____) _____ Cell Phone (_____) _____

Email: _____

Current Employer/School/Dept: _____

Work Phone: (_____) _____ Position: _____

Years with Employer: _____

PLEASE ATTACH A COPY OF YOUR MOST RECENT COLLEGE TRANSCRIPT

If already enrolled, at what college/university? _____

If you are not currently enrolled:

College Planning to Attend: _____

Type of Post Graduate Degree Planning to Obtain: _____

PERSONAL REFERENCES: Provide at least two personal references:

Name: _____

Title: _____ Company: _____

Address: _____

City _____ State _____ Zip Code _____

Phone Number. _____ Email: _____

Name: _____

Title: _____ Company: _____

Address: _____

City _____ State _____ Zip Code _____

Phone Number. _____ Email: _____

Name: _____

Title: _____ Company: _____

Address: _____

City _____ State _____ Zip Ccde _____

Phone Number. _____ Email: _____

List community involvement and any office(s) held:

Activity	# of Years Participated	Office(s) Held
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APPLICANT'S ESSAY: Please explain why you are applying for the Post Graduate Studies Scholarship and what it would mean if you were awarded the scholarship.

Signature: _____

The application is void without a signature. (If more space is needed, please attach a separate sheet.)

Recommendation from Immediate Supervisor

Applicant's Name: _____

(Please type if possible)

***Why you believe this applicant is deserving of the Post Graduate Studies Scholarship
from HRECU, INC.***

Signature: _____ PRINT NAME: _____

Title: _____ Organization: _____