Applications are due by 5 pm on Tuesday, March 31st.

Visit our website for guidelines & application.

$1000 college scholarships, we are awarding 20 high school seniors.

College Scholarship Applications now accepting.
We will be happy to provide additional copies of this material upon request. If you need any assistance with the application process, please contact Debby Belcher at (229) 420-2741 or by email at debby.belcher@georgiaunion.org. Thanks in advance for your support.

For additional information regarding GA’s Own Credit Union Scholarship program, please contact Debby Belcher at (229) 420-2741 or by email at debby.belcher@georgiaunion.org. Thanks in advance for your support.

31, 2020. Awards recipients of their guidance counselors will be notified no later than April 30.

The deadline for submitting 2020 Scholarship Applications is 5:00 PM on Thursday, March 31, 2020.

Endorsed please find copies of the application instructions, application checklist and scholarship opportunities. Encouraging potential candidates to apply for the opportunity.

A student from your school could be our next recipient, and we appreciate your help in

Cook County High School

Macon County High School

Oglethorpe Academy

Paulding County High School

Stephens County High School

Southland Academy

Franklin County High School

Henry County High School

Sumter County High School

Randolph City High School

Beauregard High School

County High School

Terrell Academy

Boston Community Charter School

Cochran Community High School

Regular Academy

Holly Springs Academy

Terrell Academy

Americus-Sumter County High School

Bibb High School

Bay County High School


MEMORANDUM

From: GA’s Own Credit Union Scholarship Committee

To: High School Guidance Counselors

GA’s Own Credit Union will award twenty $1,000 scholarships to graduating high school

Albany, GA 31707

TO: 107 N. Wetherby Blvd.,

January 2, 2020
PLEASE COMPLETE REVERSE SIDE

Awards or Accomplishments
Responsibilities
Activity 4

Dates (from) To

Awards or Accomplishments
Responsibilities
Activity 3

Dates (from) To

Awards or Accomplishments
Responsibilities
Activity 2

Dates (from) To

Awards or Accomplishments
Responsibilities
Activity 1

Dates (from) To

Your involvement, please select a separate sheet. If no involvement is listed, and you would like to explain circumstances which prevented more, attach additional sheets. If you are currently involved, or have been active in during the past four years, (if

SCHOOL ACTIVITIES, AWARDS & RECOGNITION

Name of college, university or vocational-technical college you plan to attend and its location

Committee by (Counselor Name)

Consent signature

Cumulative high school GPA (must include 12 semester of senior year and be completed in 4.0 scale) Weighted Unweighted

Expected Graduation Date

Name of high school

ACADEMIC RECORD

Account #

Approximate length of primary account holder's membership

Yes

Primary account holder's name

Primary account holder's address

Primary account holder's phone

Primary account holder's e-mail

Applicant's name

Applicant's address

Applicant's phone

Applicant's e-mail

City/State/Zip

APPLICANT INFORMATION

High school GPA is not certified via signature by a guidance counselor. Not signed on the reverse side by both the applicant and a parent/guardian, or if the cumulative will NOT be accepted if received later than 5:00 PM on Thursday, March 31, 2024. It is incomplete, is

Please read the Eligibility Requirements and Application Instructions carefully. This application

2019-2020 Academic Year

CREDIT UNION
FINANCIAL DATA

Please indicate if you receive financial assistance from your school or community activities.

Yes _____ No _____

If yes, please list the source(s) below:

(i) Includes Hope=s Pell Grant=s Scholarships?

Have you been awarded or do you expect to be awarded financial assistance for your upcoming school year, from any other source

# of persons in household: #

What is your annual household income?

ESSAY & LETTER(S) OF RECOMMENDATION

Include a brief essay and letter(s) of recommendation, at least one letter of recommendation from a school or community organization, detailing your volunteer activities.

Service Provided

Organization 1

Dates (from) (to)

Organization 2

Dates (from) (to)

Organization 3

Dates (from) (to)

Your involvement Please attach a separate sheet: If no involvement listed, and you would like to explain circumstances, which prevented

more than additional sheet(s).

SCHOOL/COMMUNITY SERVICE

Include work experience, volunteer work, or school-related activities.

Job Description

Position

Previous Employment

Job Description

Position

Current Employment

EMPLOYMENT BACKGROUND

2019-2020 Academic Year
Belcher at (229) 420-8247 or (600) 227-9220 x8247.
Please direct all questions pertaining to the application to the Office of Student Financial Aid.

Questions

All decisions of the Scholarship Selection Committee are final. All decisions concerning the scholarship awards will be the responsibility of the Selection Committee, and no appeal will be heard. Recipients of their Creative and Commercial Awards will be notified no later than April 30th, 2020. All recipients must submit their award acceptance forms to the Office of Student Financial Aid in a timely manner.

Selection

All applications will be reviewed by the Georgia O.W.N. Credit Union Scholarship Committee. The Scholarship Committee is appointed by the Board of Directors. Selection will be based on academic record, academic performance, financial need, community service, and extracurricular activities.

Application

All information provided on Georgia O.W.N. Credit Union Scholarship application forms and the application process will remain confidential. Therefore, all materials can be returned.

1. Must be complete by 5:00 PM on Tuesday, March 3, 2020. They must be filled out completely and typed or neatly printed in black or blue ink.

2. Please submit applications in the order described in the Application Checklist.

3. All information provided on Georgia O.W.N. Credit Union Scholarship application forms and any other written materials must be complete in all and returned to the credit union by the applicant.

4. The credit union and staff are not eligible to receive Scholarship Awards.

Scholarship Eligibility:

The applicant must meet the following criteria:

1. The applicant must be a dependent of a primary member of Georgia O.W.N. Credit Union. The primary member must have been a member for at least 3 months.

2. The applicant must be a senior in high school who will be enrolled or plan to be enrolled in an undergraduate course of study during the 2020-2021 academic year.

3. The applicant must be a resident of Georgia.

4. The applicant must be a member of the Georgia O.W.N. Credit Union.

5. The applicant must be enrolled in a college or university.

Scholarship Amount:

The scholarship awards will be for $1,000 and is non-renewable. Scholarships awarded will be determined by the Georgia O.W.N. Credit Union Scholarship Committee.

2019 - 2020 Academic Year

APPLICATION INSTRUCTIONS
Please direct all questions pertaining to your application to Interfraternity/Greek Affairs or contact Becky Belcher at (270) 424-8247 or (502) 273-180 x 8247.

7. APPLICATION QUESTIONS

☐ Or hand deliver applications to one of our offices.

☐ Georgia State Credit Union is not responsible for lost or misplaced items sent by mail.

Albany, GA 31708-1399
P.O. Box 71389
Scholarship Selection Committee
Georgia State Credit Union

Mail applications to:

☐ 2020 Application must be received by Georgia State Credit Union by 5:00 PM on Thursday, March 31.

8. APPLICATION SUBMISSION

☐ No receipt covers, please.

☐ Once you have put your packet together, please make a second copy and submit it with the original.

9. ADDITIONAL COPY

☐ Under prevailing laws, if requested.

☐ Recognition of School/Community Service, please place behind your letter of recommendation in the
recommendation of School/Community Service, please place behind your letter of recommendation in the

10. ADDITIONAL ATTACHMENTS

☐ If you have additional attachments for explanations of involvement in school activities, awards &
goals, please submit your academic transcripts.

☐ Please submit your resume behind your letter of recommendation.

☐ Academic Transcripts (6)

☐ Please return transcript from enrollment(s) and place directly behind completed application.

☐ Cumulative GPA provided on transcript must be converted to a 4.0 scale and certified via signature by

☐ Your official transcripts should cover your entire high school career including at least the first semester

☐ Please list your extracurricular activities on your transcript.

☐ Your official transcripts must be signed and dated by both the applicant and a parent/guardian.

☐ The application form must be signed and dated by both the applicant and a parent/guardian.

☐ Do not leave questions blank. If your answer to a question is "no", "none", or "not applicable", please

☐ Completed Application

☐ Interfraternity/Greek Affairs is not responsible for lost or misplaced items sent by mail.

☐ Mail applications to:

☐ 2020 Application must be received by Georgia State Credit Union by 5:00 PM on Thursday, March 31.

☐ No receipt covers, please.

☐ Once you have put your packet together, please make a second copy and submit it with the original.

☐ Under prevailing laws, if requested.

☐ Recognition of School/Community Service, please place behind your letter of recommendation in the

☐ If you have additional attachments for explanations of involvement in school activities, awards &
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