

2015 Jack E. O'Connor Scholarship TIDEWATER CHAPTER OF CREDIT UNIONS

Deadline for submission: April 17, 2015

4164	Metzger each Municipal Federal Credit Union Virginia Beach Blvd. nia Beach, VA 23452
I. General Information:*	
Your Credit Union:	Your Acct #
Name	School
Last First Middle Address	Home Phone ()
Street	
	_ SSN (Last Four Digits)
Apt # City	
State Zip	-
	Ages yed? mmunity, school, church, etc., including any offices
held, and/or work experience. (Use separate si	neet if necessary.)

List any rewards or special honors that you have received. (Use separate sheet if necessary.)

All Information will be treated confidentially.

*The applicant must be a credit union member before the application is submitted. To be a member, you must have an account in your name and not a joint member with someone else. Do not submit this application if you are not a member of a credit union in the Tidewater Chapter of credit unions. Not all credit unions in Tidewater are members. If you are not sure if your credit union participates in this scholarship program, please contact them prior to filling out this application.

Only completed applications will be considered. A completed application includes:

- Transcripts
- Tax Return Form 1040 from 2014
- Application form pages 1 through 3 filled out completely and signed

II. Confidential Financial Statement:

Father/ Mother Occupation	
Name of Employer	
Position	
Gross Annual Salary	
Other Income	
Total Income	
Total Family Gross Annual Income	\$

****You must attach a copy of the parents/guardians most recent Tax Return Form 1040 for 2014 with this application. Applications submitted without this form will not be considered.

Do Parents:	Own home	Rent	Buying
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III. College/University Information:

Name and scholarship mailing address of college/university you are planning to attend*:

*The scholarship will be made payable to you AND the College/University, as shown above, and presented at our May 14, 2015 Scholarship Night at the Greenbrier Country Club, Chesapeake, VA.

Estimated tuition cost (yearly)	\$
Books, travel, incidentals	\$
Room & Board (yearly)	\$
Total estimated first year costs:	\$
Less financial aid from school, family and student:	(\$)
Total estimated financial need:	\$

School Issued Student ID Number (if you have it):

IV. Special Circumstances:

Explain any special circumstances you feel the Board of Trustees should know in considering your need. (Use a separate sheet if necessary)

V. Transcripts:

School has my permission to release my son's/daughter's transcript so it may be attached to this application. I understand that this application must be complete, including transcript, before my son/daughter may be considered for a scholarship by Jack E. O'Connor Scholarship Board of Trustees.

Applicant Signature	Parent/Guardian Signature	
VI. Certification: Parent/Guardian Certification: To the best of my knowledge, the informat understand educational expenses of	tion reported is completed and correct. I is applying for financial aid to help with the I approve this application.	
Parent/Guardian	Date	
Parent/Guardian	Date	
Applicant Certification: I hereby acknowledge that the information submitted herewith is true and correct.		
Applicant	Date	
VII. In your own words, write a paragraph separate sheet if necessary)	n on why you feel you need this scholarship. (<i>Use a</i>	

VIII. In your own words, write a paragraph on your future plans and career goals. (Use a separate sheet if necessary)