

# MOLOKAI COMMUNITY FEDERAL CREDIT UNION



[www.molokaicommunityfcu.com](http://www.molokaicommunityfcu.com)

P.O. Box 1888  
135 Puali Place  
Kaunakakai, HI 96748-1888  
(808) 553-5328  
Toll free: (877) 727-5328  
Fax: (808) 553-3830

**MOLOKAI COMMUNITY FEDERAL CREDIT UNION** is a federally insured financial institution, which has been awarding scholarships to high school graduates since 1984. This year's scholarship will be \$1000.00 each to two deserving graduating seniors, and will be presented at the awards ceremony at the end of the school year. Business related fields are preferred but not necessary.

## CRITERIA:

1. Must be a graduating high school senior who is a resident of Molokai.
2. Must have a minimum 2.5 grade point average (cumulative of last seven semesters).
3. Show evidence of community service activity (volunteer work, helping others, community projects).
4. Student or parent/legal guardian must be a member of the **Molokai Community Federal Credit Union**.
5. Must be planning to pursue a course of study as a full time student in the fall semester following graduation. Any accredited post-secondary institution is acceptable.
6. **Must submit letter of acceptance prior to July 1st or award will be made to alternate.**

## PROCEDURES:

Submit completed application and the required following documents by **Monday, April 16, 2018:**

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1. Resume of school activities and community service.
2. Official high school transcript.
3. Two letters of recommendation: One from a high school faculty member, and one from an off campus adult regarding your community service activity.
4. Personal statement from applicant regarding career and educational goals.
5. Copy of letter of acceptance, if available (may submit up to July 1st).

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## MOLOKAI COMMUNITY FEDERAL CREDIT UNION

### SCHOLARSHIP APPLICATION

A. NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE NO: \_\_\_\_\_ BIRTHDATE: \_\_\_\_\_

Are you or your parent(s) members of the **Molokai Community Federal Credit Union**? \_\_\_\_\_

B. NAME OF PARENTS AND/OR LEGAL GUARDIAN(S):

\_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

TELEPHONE NO. (HOME) \_\_\_\_\_ (BUSINESS) \_\_\_\_\_

C. POST SECONDARY INSTITUTION PLANNING TO ATTEND:

\_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

Have you been accepted? \_\_\_\_\_

What field do you plan to major in? \_\_\_\_\_

Statement of certification:

I hereby declare that I have read all criteria and answered all questions on this application form and that to the best of my knowledge the information is accurate and complete.

\_\_\_\_\_  
Applicants' Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent(s) and/or Guardian(s) Signature(s)

\_\_\_\_\_  
Date