

# Illinois Quad City Chapter of Credit Unions Scholarship Program



The Illinois Quad Cities Chapter of Credit Unions has always believed in helping our members. Created in 1994, the IQCCCU awards \$2,000 annually to our members wishing to further their education. We believe strongly in giving back to our members and the communities we serve.

## Illinois Quad City Chapter

The Illinois Quad City Chapter of Credit Unions will award two \$1,000 Scholarships for the **2024-2025** school year. The IQCCCU will honor those members who demonstrate academic excellence, exhibit outstanding contributions to their community and school, and are credit union members.

Filing deadline for the ILQCCCU Scholarship is **February 15, 2024. Best of luck to you!**

## How To Apply

1. Submit this completed application filling in all requested information.
2. Mail the application, high school transcript, and three letters of recommendation by **February 15, 2024, to your credit union:**

## Illinois Chapter of Credit Unions Scholarship Committee

Credit Union  
Address  
City/State/Zip

Please make certain to answer all information. If necessary, you may photocopy this application and attach any additional pages needed to complete your application.

## Who Is Eligible?

You are eligible to apply if you are a primary member of an IQCC Credit Union with your own account. If you are not a member, you may join to become eligible to apply. Your accounts (checking, ATM, savings, etc.) must be in good standing with no delinquent or charge off loans.

Also, you must be a graduating high school senior or current college student who will enroll in an undergraduate course of study during the **2024/2025** school year at an accredited two year or four year college, university, or vocational-technical school.

Scholarship recipients are eligible to re-apply for three subsequent years. Applications must be completed each year and submitted to the scholarship committee.

## How Are Recipients Selected?

The IQCCCU scholarships are awarded to members who demonstrate academic excellence, citizenship, community and school involvement, and are credit union members. Only complete applications will be considered. The application and all requested information must be received by **February 15, 2024 to your credit union..**

## How Much Are The Awards?

The Illinois Quad City Chapter of Credit Unions will award two \$1,000 scholarships. Awards are distributed through the schools financial aid office. Distribution will be one half at the beginning of the school year and one half at the beginning of the second semester. Scholarship funds may be applied to any portion of the school's

## Questions?

Please contact your credit union.

# Illinois Quad City Chapter of Credit Unions Scholarship Program



## **Applicant Information** Please print or type completing all requested information. Only completed applications will be considered.

Account Number \_\_\_\_\_ Social Security # \_\_\_\_\_ Birth date \_\_\_\_\_

Last \_\_\_\_\_ First \_\_\_\_\_ Middle Initial \_\_\_\_\_

Street Address \_\_\_\_\_ Email Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Home Phone \_\_\_\_\_

## **Parent/Guardian**

Account Number \_\_\_\_\_ Social Security # \_\_\_\_\_ Birth date \_\_\_\_\_

Last \_\_\_\_\_ First \_\_\_\_\_ Middle Initial \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Home Phone \_\_\_\_\_

Number of other dependent children (excluding yourself): \_\_\_\_\_

Number of other family members currently in college and year: \_\_\_\_\_

## **Education Information**

*Must submit your high school transcript.*

High School \_\_\_\_\_ Graduation Date \_\_\_\_\_ GPA \_\_\_\_\_ Class Rank \_\_\_\_ / \_\_\_\_

Name of accredited post-secondary school you are or will attend: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Anticipated Annual Cost \_\_\_\_\_

2 Year Community/Junior College      4 Year College/University      Vocational/Technical School

## **Activities Information**

List all activities (school and community) in which you have participated listing any awards or honors received. You may attach a separate sheet if necessary.

Name & Description of Activity	Awards/Honors Received	Years Participated	Faculty Advisor

## Employment Information:

List all jobs you have held including a supervisor who can verify your employment. Briefly, describe your responsibilities and hours worked per week. You may attach a separate sheet if necessary.

Employer	Supervisor	Responsibilities	Employment Dates	Hours/Per Week

## Financial Information

Total Family Income, most recent calendar year:

under \$15,000	\$20,000 - \$30,000	\$30,000 - \$40,000	\$40,000 - \$50,000
\$50,000 - \$60,000	\$60,000 - \$70,000	\$70,000 - \$80,000	over \$80,000

## Sources of Funds Available For College Expenses:

Parents \$ \_\_\_\_\_ Personal Savings \$ \_\_\_\_\_ Other Scholarships \$ \_\_\_\_\_

Grants \$ \_\_\_\_\_ Financial Aid from School \$ \_\_\_\_\_ Student Loans \$ \_\_\_\_\_

## Essay

Please attach a written essay that includes the following: 1) Describe your vision for the future and how you hope to achieve it. 2) The course of study you are planning to follow and why this scholarship would be important to you. 3) If you were to plan a financial seminar for your peers, specifically what would your agenda topics be and why do you feel them worthwhile subject matter?

## Recommendations

Your application must include three written references from persons not related to you. We prefer that one be a teacher or counselor at your school. The form attached to the back of this application may be copied and given to those writing a reference on your behalf. Please list your three references and their occupation/relationship to you.

- 1) \_\_\_\_\_ Occupation/Relationship \_\_\_\_\_
- 2) \_\_\_\_\_ Occupation/Relationship \_\_\_\_\_
- 3) \_\_\_\_\_ Occupation/Relationship \_\_\_\_\_

## Application Checklist *This application becomes complete only after you have submitted:*

Primary Member Account Number	Application Form	Essay
High School Transcripts*	3 Letters of Recommendation*	

\*May be sent to scholarship committee under separate cover.

## Signature

I, the applicant, certify that the information provided in this application, is complete and accurate to the best of my knowledge.

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Signature of Applicant

Date



# Illinois Quad City Chapter of Credit Unions Scholarship Program



You have been asked to submit a letter of reference on behalf of this applicant for the Illinois Quad Cities Chapter of Credit Union Scholarship program. Please use this form as a guide when writing your letter of reference or you may simply answer these questions. The letter of recommendation must be returned or postmarked by **February 15, 2024**. Mail to: **Your own Credit Union at address below.**

Credit Union Name:  
Address:  
City, State, Zip

## Illinois Chapter of Credit Unions Scholarship Committee

Name of Scholarship Applicant:

How do you know Applicant?

Comment on the Applicant's personal character:

Comment on the Applicant's scholastic performance:

What characteristics do you consider his/her greatest attributes?

How would you rate the Applicant's potential for future personal achievement? Why?

Any additional comments:

Prepared by: \_\_\_\_\_ Occupation \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_ Daytime Phone \_\_\_\_\_