



## 2024 / 2025 Scholarship Application for edge Youth Account members between the ages of 18 – 25

Name:			email:	
Home	e Address:			
City, S	State, Zip Code:			
Home Phone: Cell		Cell Phone:	Best time to call:	
High School:			Date of Graduation:	
Antici	ipated Major:			
Post-	secondary institutions a	pplied for the upcoming academic	z year:	
On ty	ped, <u>separate sheets c</u>	of paper:		
1. Li:	st the community activities, school activities and awards received			
2. Te	ell us about what you plan to do upon completing your education			
3. Aı	swer the following question. Essay must be between <u>350-400 words, typed and double-spaced</u> .			
	escribe your plan for ma ervices in your plan?	naging money during college. How	will you incorporate 7 17 Credit Union's products and	
GENE	ERAL REQUIREMENTS	FOR SCHOLARSHIP. All docum	ents must be submitted together.	
1.		an <i>edge</i> club member at Seven Sev	•	
2.		between the age of 18 – 25 as of Marc		
3.		graduating from high school the curre	ent scholarship year. ing a post-secondary education at an accredited	
4	facility.	enroned as a ron-time student pursu	ing a post-secondary education at an accredited	
5.	. The applicant must ha	ve and maintain at least a 3.00 grade uidance office verifying GPA)	point average on a scale of 4.o. (Must attach grade	
6		rovide 2 letters of recommendation.		
7.		granted without regard to sex, race, o	or creed.	
8.			ent. One half of the scholarship will be paid for the fall	
			ed for tuition, fees, and book expenses.	
9		olarship. All interested applicants mus vide all required documentation.	st complete a new application for consideration for each	
10		etween the ages of 18 – 25 at time of	award.	
l certif	y that this information is o	complete and correct to the best of m	y knowledge:	
SIGNA	ATURE OF APPLICANT		DATE	

Return completed application with requested attachments to any 7 17 Office or mail to: 7 17 Credit Union