

**WFAS & UniStar Federal Credit Union**  
**"STUDENT OF THE YEAR"**

Scholarship application

All information reviewed is strictly confidential

Student Name: \_\_\_\_\_

Counselor: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

The following material must be submitted with your scholarship application. Please check off each item you have included. Your application is complete when all material has been received by the scholarship committee.

- Completed: *Section I* through Section IV in the Scholarship Application
- Completed: *Section V* (typewritten and attached)
- Counselor's Evaluation Form (attached)
- Official Transcript

Parents and students should review this application together before submitting it. The student's signature and the signature of a parent or guardian are required below.

*We submit this application to the Scholarship Committee. We believe all information furnished is true and accurate.*

SIGNATURE OF STUDENT: \_\_\_\_\_ DATE: \_\_\_\_\_

SIGNATURE OF  
PARENT/GUARDIAN: \_\_\_\_\_ DATE: \_\_\_\_\_

If you have any questions first consult your Guidance Counselor. If at that time you have any further questions or concerns, please contact Debbie Lindsay at (914)-631-1381 x 216 or via email at [dlindsay@unistarfcu.org](mailto:dlindsay@unistarfcu.org).

Submit complete packet unfolded to:

UniStar Federal Credit Union  
Scholarship Application  
303 South Broadway, Suite 126  
Tarrytown, NY 10591  
Attn: D. Lindsay

**Deadline is June 6, 2008**

**WFAS & UniStar Federal Credit Union**

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**Section I - Personal Information**

*This portion is to be completed by the student*

LAST NAME: \_\_\_\_\_

FIRST NAME: \_\_\_\_\_

MIDDLE NAME (FULL): \_\_\_\_\_

**Permanent Address:**

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

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_

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

**Secondary Address (if applicable):**

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

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_

**Parent or Guardian Information:**

LAST NAME: \_\_\_\_\_

FIRST NAME: \_\_\_\_\_ MIDDLE NAME (FULL): \_\_\_\_\_

DAYTIME TELEPHONE NUMBER: \_\_\_\_\_

**Section II – High School Information**  
*This portion is to be completed by the student*

**High School Information:**

HIGH SCHOOL NAME: \_\_\_\_\_

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

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

MAIN TELEPHONE NUMBER: \_\_\_\_\_ FAX: \_\_\_\_\_

GUIDANCE COUNSELOR: \_\_\_\_\_

TELEPHONE NUMBER (with extension): \_\_\_\_\_

FAX: \_\_\_\_\_

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

PLEASE LIST ANY ACADEMIC OR SPECIAL RECOGNITIONS THAT YOU HAVE RECEIVED:

1.) \_\_\_\_\_

2.) \_\_\_\_\_

3.) \_\_\_\_\_

4.) \_\_\_\_\_

5.) \_\_\_\_\_

PLEASE LIST ANY LEADERSHIP EXPERIENCE THAT YOU HAVE ACQUIRED DURING YOUR HIGH SCHOOL CAREER:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Section III – Extracurricular Involvement  
*This portion is to be completed by the student*

**Extracurricular Activities/Community Involvement:**

1.) ORGANIZATION: \_\_\_\_\_

POSITION: \_\_\_\_\_

DESCRIPTION: \_\_\_\_\_

\_\_\_\_\_

2.) ORGANIZATION: \_\_\_\_\_

POSITION: \_\_\_\_\_

DESCRIPTION: \_\_\_\_\_

\_\_\_\_\_

3.) ORGANIZATION: \_\_\_\_\_

POSITION: \_\_\_\_\_

DESCRIPTION: \_\_\_\_\_

\_\_\_\_\_

4.) ORGANIZATION: \_\_\_\_\_

POSITION: \_\_\_\_\_

DESCRIPTION: \_\_\_\_\_

\_\_\_\_\_

5.) ORGANIZATION: \_\_\_\_\_

POSITION: \_\_\_\_\_

DESCRIPTION: \_\_\_\_\_

\_\_\_\_\_



Section V – Short Essay

*This portion is to be completed by the student*

*ENCLOSE A TYPEWRITTEN STATEMENT. NO MORE THAN 200 WORDS IN LENGTH, ON THE FOLLOWING TOPIC:*

**"WHY DO I DESERVE TO BE THE WFAS 'STUDENT OF THE YEAR.'"**

**WFAS & UniStar Federal Credit Union**  
**"STUDENT OF THE YEAR"**  
Counselor Evaluation

All information reviewed is strictly confidential

APPLICANTS NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

COUNSELOR'S NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

**Please type your comments on this sheet or on a separate piece of paper.**

1.) CHARACTERISTICS OF APPLICANT: (Including any information that would help the Scholarship Committee know the applicant better):

2.) SERIOUSNESS OF PURPOSE OF COLLEGE: