Gates of the Mountains Chapter of Credit Unions  
*People Helping People Scholarship - Non-Traditional*

**Eligibility Requirements**

1. Have graduated from high school and are not currently enrolled in college. Live in Lewis & Clark, Broadwater, Jefferson, Gallatin, Silver Bow, Gallatin, or Powell counties.
2. Be accepted as an incoming freshman or sophomore to an accredited Montana college, university, trade, or craft school.

**Application Requirements**

1. A completed application
2. Two essays of 500 words or less each
3. Personal statement
4. A resume detailing work experience and accomplishments (Please include supervisors and their contact information)
5. Two letters of reference (may be sent separately)

**Award Criteria**

1. Essays
2. Financial Need
3. Work Experience
4. Community Involvement
5. References

**Timeline**

1. Completed applications (including reference letters) must be postmarked by April 1, 2015 and sent to the address on the next page (If sent via e-mail, it must be received by 11:59 pm, April 1, 2015)
2. The recipient will be notified by May 1, 2015.
3. The recipient will be invited to attend the May 12 chapter meeting to receive the award.
4. The scholarship funds will be sent directly to the recipient’s school in the fall.

**Provided by the following area credit unions and organizations:**
APPLICATION

Mail completed application and attachments to:

Montana Credit Union Network
Attn: Alana Listoe
101 N Rodney St
Helena, MT 59601
or alana@mcun.coop

Contact Information

Applicant’s Name (First, Middle, Last):
________________________________________________________________________________

Address (Street, City, State, Zip):
________________________________________________________________________________

Telephone: __________________________________________

*Are you a member of a credit union? __________

*If so, which one? ________________________________________________________________

*This will not have any bearing on the scoring of your scholarship

School Information

High School Attended: __________________________________________________________________________________

Address (Street, City, State, Zip):
________________________________________________________________________________

Graduation Date: __________________________________________

College or University you will attend this fall: ________________________________________________________________

Address (Street, City, State, Zip):
________________________________________________________________________________

Anticipated Major: __________________________________________________________________________________

Community Experience

Please detail your community involvement, including any awards received (you may attach a separate sheet, if necessary):

________________________________________________________________________________

________________________________________________________________________________

________________________________________________________________________________
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Financial Information

Please indicate your total family income from the most recent calendar year:

☐ Under $20,000  ☐ $20,001 - 30,000  ☐ $30,001 - 40,000  ☐ $40,001 - 50,000
☐ $50,001 - 60,000  ☐ $60,001 - 70,000  ☐ $70,001 - 80,000  ☐ Over $80,000

Describe any special financial circumstances that may cause you to have greater need for this scholarship:

__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________

Personal Statement

On a separate sheet of paper, please describe, in 200 words or less, how receiving this scholarship will help you achieve your educational and/or professional goals.

Recommendations

Please include two written references from persons not related to you (preferred: at least one from a teacher, employer, etc.). A reference guideline is attached and may be given to those writing a reference on your behalf.

Reference Name: ___________________________________________________________________________________
Phone: ______________________________
Occupation/Relationship to you: ___________________________________________

Reference Name: ___________________________________________________________________________________
Phone: ______________________________
Occupation/Relationship to you: ___________________________________________

Essays

On a separate sheet(s) of paper, please complete the following essays and attach them to your application. All essays must be no more than 500 words typed.

1. The credit union philosophy is “People Helping People”. Describe how this philosophy has impacted your life. How can you adopt this motto to improve the quality of life for you and those around you?
2. Explain what constitutes good financial planning and why it is important.
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Signature

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

____________________________________________________  ____________________________
Signature  Date

*****Completed applications, and all supplemental materials, must be postmarked no later than April 1, 2015 (or received no later than 11:59 pm, if e-mailed). Applicants must meet all requirements outlined in the eligibility requirements. Applications will not be returned, and will become property of the Gates of the Mountains Chapter of Credit Unions. Illegible, incomplete, or untimely entries may be disqualified. The winner will be notified on or before May 1, 2015 by mail or phone. The recipient agrees to have their name/photos published in credit union materials. After confirmation of registration and acceptance at an accredited Montana college, university, trade, or craft school, for a consecutive 12 or more credits/unit hours, award checks will be paid to the school on the recipient’s behalf.
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You have been asked to submit a letter of recommendation for a *People Helping People Scholarship* applicant. You may use this form as a guideline or simply answer these questions. Your recommendation can be mailed to the GOM Chapter at the address listed below or returned to the student in a sealed envelope. Complete applications, including recommendations are due by **April 1, 2015**.

Montana Credit Union Network  
**Attn:** Alana Listoe  
101 N Rodney St  
Helena, MT 59601  
*or* alana@mcun.coop

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<tr>
<th>Name of Applicant: _____________________________________</th>
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<td>How do you know the applicant? ____________________________</td>
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<td>Comment on the applicant’s character: ______________________</td>
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<td>What characteristics do you consider his/her greatest attributes?</td>
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<td>How would you rate the applicant’s potential for future personal achievement? Why?</td>
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Prepared by: ________________________________________________  
**Occupation:** ____________________________________________
Gates of the Mountains Chapter of Credit Unions

People Helping People Scholarship - Non-Traditional

Signature: ___________________________  Date: ___________  Daytime Phone: ___________