

2025 Gail Walker Scholarship Application

For the student with a grade point average **(GPA) between 2.5 to 3.5** on a 4-point scale AND

Active participation at a job or jobs in your community within the last four years

Please read over the entire application before you begin.

CATEGORIES

Category 1: Personal Information Concerning Applicant / Signature Page

Category 2: School Information Category 3: Work Information

Category 4: Scholastics/Community Participation

Category 5: Essay

- A copy of your UNOPENED transcript from your current high school or college must accompany this application. Do not make this a part of the application. The school you attend will provide your transcript in a SEALED envelope. DO NOT OPEN IT. Paper-clip your transcript to the finished application.
- All opened or "tampered" transcripts will be disqualified and will disqualify your complete scholarship application.
- Transcripts <u>can</u> be sent directly to the credit union. For electronic transcripts please call 219-874-6943 x327
- You must answer all questions asked. Please type all answers on a clearly-labeled 8.5x11" piece of paper.
- All answers listed on a corresponding paper must be typed, easy to read and include the corresponding question. If a question is not relevant, please explain why. Do NOT write N/A.
- Do NOT WRITE your name on any page EXCEPT for page 4, the page titled "Personal Information Concerning Applicant" and "Signature Required."
- All applications received become the property of Members Advantage Credit Union and will not be returned.
- Do NOT include a photo of yourself. Members Advantage Credit Union will award this scholarship based on work and school information, scholastic/community participation AND essay.
- All walk-in and mail-in applications must be received or postmarked by <u>March 3</u>, <u>2025</u>. No faxed or emailed applications are accepted.
- All participating applicants will be notified of the results.
- Winner of the Members Advantage Credit Union Gail Walker Memorial Scholarship is not eligible to win any other scholarship from Members Advantage Credit Union.

Please mail the application to the following address:

Members Advantage Credit Union Attn: Scholarship Committee 3064 Ohio Street Michigan City, IN 46360

Gail Walker Memorial Scholarship

In 2010, Members Advantage Credit Union established the Gail Walker Memorial Scholarship. It is to be awarded annually in the amount of \$1,000 in the form of a check payable to the student and the college or university he/she is attending. This scholarship will be given based on the following criteria:

- Scholastic achievement
- Personal integrity
- Active participation in and service to their community
- · Active participation in senior year of high school, college freshman/sophomore years
- Must have a grade point average (GPA) between 2.5 to 3.5 on a 4-point scale
- Active participation at a job or jobs in your community within the last four years

Important information about the Gail Walker Memorial Scholarship:

- Each applicant must have a regular savings account in his or her own name with a \$50 minimum balance at Members Advantage Credit Union.
- This scholarship is available to all eligible members of Members Advantage Credit Union, except for employees, management, board member, committee members or immediate family members of any above mentioned.
- Each applicant must currently be enrolled in a high school, college or trade school.
- All scholarships will be issued in the name of the applicant and their attending college unless otherwise decided by the credit union.
- All applications submitted will become the property of Members Advantage Credit Union.

APPLICANT INFORMATION

Name:		
(First)	(Middle Initial)	(Last)
Address:		
City, State, Zip:		
Phone number with area	ı code:	
Email address:		
Members Advantage Cre	edit Union account number ((last 3 digits):
Name of school:		
Signature Required		
accepted without it. The	second signature line is a se he second signature line is r	as your application will not be eparate line that you should sign for the acceptance o
Please sign the applicati	on, and then print your nam	e.
correct, and my own wor required to attend Memb presentation of my schol the right to use my name	rk. I also understand if I am spers Advantage Credit Union larship. If selected, Members and likeness for marketing	d in this application is truthful and selected as the winner, I may be n's Annual Meeting for public s Advantage Credit Union reserves purposes used specifically for the Walker Memorial Scholarship.
Applicant Signature:		
Applicant Name (printed):	
Date:		

SCHOOL INFORMATION

Current GPA:			
Class Rank: ou	ut of		
Name and address of college	e or trade school you attend or	olan to attend:	
Name:			
Address:			
City:	State:	Zip:	_
Please indicate the following	with an X and date:		
I have been accep	oted date of acceptance:		
I have not been a	ccepted as of a date:		
Intended course of study:			_
Work Information			
Job 1 Employer Name:			
Phone:			-
Employer Address:			_
Duties:			
Employed from/to dates:			

Job 2 Employer Name:
Phone:
Employer Address:
Duties:
Employed from/to dates:
Job 3 Employer Name:
Phone:
Employer Address:
Duties:
Employed from/to dates:

If more space is needed, please continue on separate sheet of paper.

SCHOLASTICS/COMMUNITY PARTICIPATION

List all scholastic or community participation. Please note when you participated in these activities.						

ESSAY QUESTIONS

Please complete the following essay questions. **All answers must be typed.** Please stay within the word limit designated.

Essay question 1

(100 word minimum/200 word maximum)

Why do you want to get a college education?

Essay question 2

(300 word minimum/500 word maximum)

How do you see technology affecting your life in the next 10 years?