



Rivertown Credit Union Scholarship

Name: _____

Date of Birth: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Currently a member of Rivertown Credit Union: Yes No

Unweighted GPA: _____ ACT score: _____ SAT score: _____

Transcript attached? Yes No If no, explain: _____

School Activities: _____

Community Activities: _____

Work Experience: _____

Additional information that you believe is an important consideration: _____

I CERTIFY THAT ALL INFORMATION PROVIDED IS TRUE AND CORRECT. I UNDERSTAND THAT MY APPLICATION WILL NOT BE CONSIDERED IF IT IS NOT FULLY COMPLETED.

Signature: _____ Date: _____

