

CANDIDATE APPLICATION, AGREEMENT AND OFFICIAL RULES

Financial Plus Credit Union will award one scholarship in the amount of \$1,000.00 to a candidate from Bendle High School who meets the following eligibility requirements:

- 1. The applying candidate must be a current Michigan resident.
- 2. Candidate must be a high school student from Bendle High School graduating in 2024 with a minimum grade point average (GPA) of 3.0
- 3. The candidate must complete the application with a short essay (500 words or less) *Think about how ready you are for a successful money future, do you feel prepared, why or why not? Share one specific thing you wish you had learned about money earlier in life. Talk about how you're going to learn it now and how it can help you do well in the future*
- 4. The candidate must submit the application and essay with an official copy of their current transcript and one letter of recommendation from a legal adult other than a relative.
- 5. Except as provided in the rules, the candidate must be enrolled in an accredited college, trade school or university by July 7, 2024.

Application, essay, letter of recommendation, and transcript (referred to as the "Scholarship Package") must be submitted no later than May 3, 2024 by 5:00 P.M. Eastern Standard Time (EST) (see submission instructions below). Scholarship Packages which are incomplete or received after the stated deadline will be disqualified. Providing any information which is fraudulent or misleading will result in automatic disqualification. Scholarship entry period begins March 1, 2024 through May 3, 2024. Limit one scholarship entry per person.

Scholarship Packages may be mailed to the following address post-marked by May 3, 2024, dropped off at any Financial Plus Credit Union Branch Office by 5:00 P.M. EST on May 3, 2024, or uploaded to myfpcu.com/FPCU-Scholarship-Bendle by 5:00 P.M. EST on May 3, 2024.

Financial Plus Credit Union ATTN: Ciara Kolasinski P.O. Box 7006 Flint, MI 48507

Designated Scholarship Judges at Financial Plus Credit Union will review all scholarship entries and award the scholarship recipients based on attaining all eligibility requirements and contents of essay. The scholarship recipients will be announced on May 17, 2024 by 5:00 P.M. EST by phone contact from Financial Plus Credit Union. The funds for the scholarship will be paid directly to the educational institution.

Any scholarships unclaimed by July 19, 2024 will be forfeited. The designated Scholarship Judges will select a runnerup during the original review of the scholarship entries. The forfeited scholarship will then be awarded to the runner-up recipient, who will be notified by phone contact from Financial Plus Credit Union by 5:00 P.M. on July 26, 2024.

Members of Official Family of Financial Plus Credit Union and their immediate family members, including but not limited to designated scholarship judges, employees of Financial Plus Credit Union, and immediate families of such judges and employees are not eligible to win. Financial Plus Credit Union does not discriminate on the basis of age, gender, familial status, marital status, race, color, religion, national origin, sexual orientation, height, weight, or disability. All application information will be kept strictly confidential.

For colleges and universities which are not accredited, additional documentation may be required for proof of authenticity and legitimacy prior to awarding the scholarship.

By signing this agreement, I have read and fully agree to the terms stated above.

Candidate's Signature:		Date:
If candidate is under 18 years of ag	je, signature of parent to guardi	an is required:
Parent's or Guardian's Signature:		Date:
CONTACT INFORMATION		
Name of Candidate:		Date of Birth:
If candidate is under 18 years of ag	e, include parent or guardian's n	
Address:		
City:	State:	Zip Code:
Primary Phone Number:	Secondary P	hone Number:
E-Mail Address:		
SCHOOL INFORMATION FOR 2024	SRADUATING HIGH SCHOOL STU	IDENT
High School Name:		
Address:		
City:	State:	Zip Code:

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Grade Point Average:	Special Awards/Honors:	
Accepted College, Trade School or	University Name:	
Address:		
City:	State:	Zip Code:
Date Accepted:	First Semester	r Attending:
HOW DID YOU HEAR ABOUT THE	FINANCIAL PLUS CREDIT UNION	SCHOLARSHIP?
Check all that apply:		
🗆 Email		
Social Media		
In-Branch Staff		
Flyer		
□ Friend or Family		
□ School		
□ Other		

AUTHORIZATION OF PHOTOGRAPHY/COMMERCIAL RELEASE FORM

I, ______(print full name) hereby authorize Financial Plus Credit Union to use my photograph(s), testimonial(s), and any film appearance(s) to promote the credit union in any/all delivery channels as it deems necessary.

If at any time I want to terminate my authorization, I will notify the Credit Union and it will have a minimum of 120 days to comply. The Credit Union will not use the photograph(s) or testimonial(s) in any new campaigns, promotions, radio spots, commercials, etc. on a go forward basis after the cancellation is submitted. Financial Plus Credit Union need not cancel, reprint, or modify any existing marketing material prior to the termination date.

By signing this form, I fully agree to terms stated above. The agreement will automatically elapse after one-year. I acknowledge and agree that no compensation will be received for the usage of my photography, testimonials, appearances, etc.

Student's signature:	Date:

If candidate is under 18 years of age, signature of parent or guardian is re	equired:
Parent's signature:	Date:

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