

# 2022-2023 HIGH SCHOOL SCHOLARSHIP APPLICATION

Applications are available online at:

https://www.myconsumers.org/promos/scholarship-application

#### **PURPOSE**

Consumers Cooperative Association (Proud Sponsor of Consumers Credit Union) has established a scholarship program to assist eligible high school seniors who plan to continue their education in college. Scholarships are offered for full-time study at an accredited institution of the student's choice. The scholarship is funded by the one-time membership fee paid by members to join Consumers Cooperative Association and become eligible to join Consumers Credit Union.

# **ELIGIBILITY**

For an applicant to be considered, the following criteria must be met:

- 1.)
  Applicant and/or parent/guardian must be a member of Consumers Credit Union or Andigo Credit Union in good standing for a minimum of one year as of 10/1/2021.
- 2.) Applicant must be a graduating high school senior in 2023

3.) Applicant plans to attend an accredited 2+ year college, university, or trade school for the 2023-2024 academic year

#### **AWARDS**

Consumers Cooperative Association will award Thirty-one (31) scholarships totaling \$70,000 to high school seniors graduating in the class of 2023. Thirty (30) of the selected students will each be awarded a scholarship worth \$2,000. One (1) student will be selected to receive the Bill Reidel Memorial Scholarship worth \$10,000.

# **SELECTION OF RECIPIENTS**

Awards will be based on the application information and supporting documentation provided. Scholarship recipients are selected based on community involvement, school involvement, work experience, academic performance, essay, unusual personal or family circumstances, and financial need. The selection of the scholarship recipients is made by the Consumers Cooperative Association Scholarship Committee. In no instance does any officer or employee of Consumers Credit Union play a part in the selection. All applicants agree to accept the decision as final.

#### **REQUIRED DOCUMENTS**

Applications are not considered complete, and you will not be eligible to be selected for a scholarship unless ALL of the following items are included with your application. Keep end-of-the-year holidays and school closures in mind to ensure meeting the 12/31/2022 application deadline. No exceptions.

- 1.)
  Current unofficial Transcript (PDF). This will look similar or identical to an official transcript but may not have a seal or tamper-proof mark on it or inside a sealed envelope. Contact your guidance counselor to obtain this information. In some cases, it may take 7-10 days to get this document.
- 2.)
  Copy of your first semester grades (if available) if not your senior year course schedule
- 3.)

The student will be responsible for downloading the "Letter of recommendation" document and emailing it to a school representative of their choice for completion. The school representative will be responsible for emailing the form back to CCA@myconsumers.org.

# **APPLICATION PROCESS:**

Eligible applicants are encouraged to apply electronically by completing the online form at (https://www.myconsumers.org/promos/scholarship-application).

Correspondence throughout the application process will be by Email and US postal mail. It is the applicant's responsibility to ensure they have provided valid information to receive notifications. Applicants should add CCA@myconsumers.org to their contacts or "safe senders list" so messages are not sent to their junk mail folder.

# Completing the on-line application:

Enter the data in the format described. Please use proper punctuation and standard capitalization.

- 1.) Fields indicated with an (\*) are required fields.
- 2.)
- 3.)

Once all application requirements are satisfied, carefully review your entire application before clicking the "Submit" button at the end of the application.

Upload required documents before submitting the application

4.)

Once the application is successfully submitted, no additions or changes to the application can be made. You will no

5.) longer have access to your application account or data.

We recommend you print a hard copy of your application for your records. Do not send a printed copy of the Credit

6.)

Union.

When you submit your application, you will receive a message on the screen to acknowledge receipt of your

7.) submitted application.

#### APPLICATION DEADLINE

All applications must be submitted by December 31, 2022 by 11:59 p.m. CST (central standard time)

# **NOTIFICATION**

Selected applicants will be notified by March 5, 2023. Not all applicants will be selected a recipients.

# **PAYMENT OF SCHOLARSHIP**

The \$2,000 Scholarships will be paid in one installment by the Consumers Cooperative Association. A check will be made payable to the student's school and mailed to each recipient's home address by August 1, 2023. The \$10,000 Bill Reidel Memorial scholarship will be paid in two installments over two years. \$5,000 will be paid in year 1, and the remaining \$5,000 will be paid in year 2. The student will be required to maintain a B average in the first year to receive the second-year payment. The checks will be made payable to the student's school and mailed directly to the school by August 1, 2023.

#### **OBLIGATIONS**

Recipients have no obligation to the Consumers Cooperative Association. Recipients are, however, required to notify the scholarship committee of any changes in address, school enrollment, or other relevant information.

Recipients may be asked to provide a photo for publication on the Consumers Cooperative Association's website.
 Photo is non-returnable

2.)

# **REVISIONS**

Consumers Cooperative Association reserves the right to review the conditions and procedures of this scholarship program and make changes at any time, including termination of the program.



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itact us: Email: CCA@myconsumers.org

# Consumers Cooperative Association SCHOLARSHIP APPLICATION For 2022-2023 School Year

		For Offi	ice Use Only	/: Application ID:			
DLA	RSHOP ELIGIBILITY:						
1.	1. Are you and/or your parent/guardian a member of Consumers Credit Union or Andigo Credit Union in good						
1.	standing for a minimum of one year (as of 10/1/2021)?						
	CHOOSE ONE:						
		Yes No					
	SELECT ALL THAT APPLY:						
			Se	elf Parent Guardian Both			
	If YES, please provide the Primary	account holder's information:					
	*First Name:	*Last Name:	*Year	*Member account number			
			Joined:				
		·					
	This information is used	o validate that selected applicants me	t the require	ed membership criteria.			
2.	Will you be graduating high school as a senior in the class of 2023?						
۷.	CHOOSE ONE:	5 No					
	Will you be attend an accredited 2	year college, university or trade scho	ol for the 20	022-2023 academic year?			
3.							
	CHOOSE ONE: Ye	s No					

If you have answered YES to the three questions above, you may proceed with the scholarship application. If any responses are NO, then you are not eligible for this scholarship opportunity.

First Name:			Last Name:	Last Name:		
Permanent Home	Address:		<b>-</b>			
City:			State:		Zip Code:	
High School Attending:			Graduation D	Graduation Date (MO/YYYY): GPA:		
Date of Birth: Gender: M F			Email:			
Home Phone Nun	nber:		Cell Phone Nu	ımber:		
FV				For Office Use Only	: Application ID:	
OUSEHOLD INFO	RMATION:			For Office Use Only	: Application ID:	
otal combined hou \$0 -		income: <b>CHOOSE ON</b> \$40,001 - \$80,000	<b>NE</b> \$80,001 -	\$120,001 -	\$160,001 or more	
\$0 - \$40,0000	usehold net		\$80,001 - \$120,000 sibling's			
\$0 - \$40,0000 umber of people	usehold net	\$40,001 - \$80,000 Fing in your home:	\$80,001 - \$120,000 sibling's	\$120,001 -		

# **UNUSUAL CIRCUMSTANCES**

Check all that apply to your current situation that you expect to affect you or your family over the following 12 months:

Loss of job	Bankruptcy	Income reduction	Illness or injury	Death in family	Physical disability	Unexpected medical expenses	Other

<u></u>	If you would like to provide any additional explanation of circumstances, please do so below:					



# Consumers Cooperative Association SCHOLARSHIP APPLICATION For 2022-2023 School Year

For Office	se Only: Application ID:	

#### STUDENT APPLICATION QUESTIONNAIRE

So that we may get to know you better, please complete the following questionnaire.

Anticipated major: Personal Goal(s) Related to major:

Chemistry

Medicine, Medical Research,

**Community Outreach** 

# **Community/Service Involvement:**

List your involvement in any community service activities outside of your high school over the past four years. Indicate the year(s) of participation, leadership positions (if applicable), and average time commitment (hours) per year

Activity Position Hour/Year

# Year(s) of Participation

(ex: Habitat for Humanity) (ex: Volunteer)

FR SO JR SR

FR SO JR SR

FR SO JR SR

Advocate Good Shepherd FR SO JR SR Volunteer, 100 hrs/year

# **School Involvement**

List any extracurricular activities (clubs, sports, volunteer, etc.) you were involved in within your high school over the past four years. Indicate the year(s) of participation, leadership positions (if applicable), and average time commitment (hours) per year.

#### Activity Position Hour/Year

# Year(s) of Participation

(ex: National Honor Society) (ex: Secretary)
FR SO JR SR

Club Gymnastics FR SO JR SR USAG Level 9 Gymnast 500 hr/year

High School Gymnastics FR SO JR SR Team Captain, Varsity (all years) 300 hr/year

Catalyst, Substance Use Prevention FR SO JR SR Executive Board Member (two years) 100 hr/year

# **Work Experience**

List any paid or unpaid work experience over the past 4 years. Indicate which year(s) you worked, your job title or type of work, and average hours per year.

# Place of Employment Position Hour/Year

# Year(s) of Participation

Portillos FR SO JR SR cashier, 200 hr/yr Biostatistics using R Intern FR SO JR SR 30 hr/year FR SO JR SR FR SO JR SR



# Consumers Cooperative Association SCHOLARSHIP APPLICATION For 2022-2023 School Year

For Office Use Only: Application ID:

lus how your extracurricular activities in the community, at school, and at work impacted you as re the most meaningful to you and why?	a person. Which activities
<u> </u>	

Share why you feel you should be selected as a scholarship recipient

My goal for undergrade study is to prepare myself for a career in medicine as it combines my passion in health care and servicing and helping others.

I have always had a passion for healthcare, in many forms. Academically, I have always enjoyed biology and chemistry classes. This year, I am even taking a course on human anatomy and physiology to better prepare myself for starting a career in the medical field. Beyond this, my hard work in school, earning an AP Scholar with Distinction award, as well as the being on my school's highest honor roll, Gold Honor Roll, for all semesters of high school. The field that I'm pursuing has a lot of rigor in the course load, volume, and content, and my academic achievement signals that I am prepared for the difficult classes in my future.

- 2) I believe health care should really serve the people. I have been a part of Catalyst for six years, educating staff, students, as well as state legislators on how they can help youth stay substance free and live a healthy life. I've attended multiple Community Anti-Drug Coalitions of America conferences to hear speakers from all over the country share their methods for creating change in the health of youth. I also had the opportunity to participate in a round table discussion with Senator Julie Morrison and former Illinois Department of Public Health Director Dr. Ezike, and presented to a graduate class at UIC about Catalyst's methods of creating legislative change with Professor Ziegler. All in all, these opportunities have led me to develop a passion for caring about the health of others, and being able to impact that through multiple avenues of advocacy. Whether grassroots outreach, or legislative action, I have found each one fulfilling.
- 3) Even study is intriguing, outreach is rewarding, it does not replace the excitement when I get to help patients hands-on. In discovering more about impacting other people's health, I also volunteer at Good Shepherd Hospital in Barrington. There, I have interacted with visitors, as well as worked in the Labor and Delivery Unit and the Cardiac Unit, preparing cribs for newborns, replacing heart monitor batteries, and assisting with patient discharge.

I want to carry on my passion for healthcare as I go onto college, medical school studies and beyond. This scholarship will be one of the first supports I receive outside my family to kick start my dream career and life path, contributing to me becoming an effective undergraduate student, and future physician. I am determined to make a difference in the health of others, whether through legislative action, grassroots outreach, or becoming a professional physician, and this scholarship is an imperative step to being able to help others in this way.



# Consumers Cooperative Association SCHOLARSHIP APPLICATION For 2022-2023 School Year

For Office Use Only: Application ID:
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# Application and required documents must be received by 11:59 pm CST December 31,2022

Applications are not considered complete, and the student will not be eligible for the scholarship selection process unless <u>ALL</u> of the following required documents are included with the application. Keep end-of-the-year holidays and school closures in mind to ensure meeting the application deadline. No exceptions.

# **Required Documents**

1.)

Current unofficial transcripts. The transcripts will look similar or identical to an official transcript but may not have a seal or tamper-proof mark on them or inside a sealed envelope. Students should contact their guidance counselor for

help in obtaining this information. In some cases, it may take 7-10 days to get this document.

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- 3.)
  school representative of their choice for completion. The school representative will be responsible for emailing the form back to CCA@myconsumers.org.

# **CERTIFICATION SIGNATURE**

I certify that the information provided on this application and all supporting documentation is true, accurate, and complete. I understand that if I give information that is not true, the application will be disqualified and will not be considered for a scholarship. The information is provided willingly and freely as part of the application for this scholarship offered by the Consumers Cooperative Association. It's understood that this information will be kept confidential by the Scholarship Committee and will become the property of the Consumers Cooperative Association. Verification of information may be required upon request.

All scholarship recipients will be notified by March 5, 2023.

Application and required documents must be received by 11:59 pm CST December 31, 2022.

**Applicants Signature Date** 

Name of school representative completing letter of		
recommendation: School representative's email address:		
	For Office Use Only: Application ID:	
	Transcripts received:	
	Letter of Recommendation received:	