

2024 Memorial Scholarship Program

CME Credit Union is honored to announce the 2024 Memorial Scholarship Program. This year the Credit Union will award six (6) \$1,000 Scholarships to eligible high school seniors or undergraduate students currently enrolled and attending an accredited college or university.

Eligibility & Items Required

Information regarding eligibility and requirements for consideration for these scholarships are listed below.

- Applicants must be a high school senior or current undergraduate student who will be or is enrolled at an accredited college/university for academic year 2024/2025.
- Student/Applicant must be a member of CME Credit Union at the time of application.
- Employees, Board and Committee Members are not eligible for the Scholarships.
- The following are items requested and must be included with your application by the due date to qualify for consideration:
 - Completed Memorial Scholarship Application
 - A typewritten essay of at least 250 words based on the subject noted below
 - An academic transcript of student's grades

Essay Criteria

Your essay should be one page, typed and include a minimum of 250 words. Do not use your name in the essay or put your name on the essay page. Your essay must speak to the following:

As you look toward your future, how do you plan on making a positive difference in the school you attend or community in which you live. Community can include your friends and family, fellow students, or the greater community in which we all live.

Evaluation Criteria

The Memorial Scholarship Committee will evaluate, and award scholarships based on the essay, grades, community service, volunteer work and extra-curricular activities provided by the student.

Applications, along with accompanying documents may be emailed to operations@cranstonmecu.org, or mailed/dropped off to/at the following address:

CME Credit Union Attention: Memorial Scholarship Committee 1615 Pontiac Ave Cranston, RI 02920

Submission Due Date

To be considered, your application and all requested information must be received by the Credit Union no later than **Friday, April 12, 2024**.



2024 Memorial Scholarship Application

Student Name:		CME Credit Union Account #:		
Address:	City:	St	ate: Zip:	
Home Phone #:	Cell Phone #:	email:		
Name of Current School:				
College or University you are/	plan to attend:			
Have you been accepted? Yes_ Scholarship is for individual	No Field of s	study/major: ng the 2023-2024 aca	demic school year.	_
Community Service, Voluntee List the community service, vo with in the past few years. Incl Also include sport teams, scho	llunteer work and/or extr lude non-paid activities w	a-curricular activi vith service-based	clubs, organizations, o	r schools.
Name of Organization	Length of involvement Years/Months	Hours per year	Your Role	
Are you employed? O No O Yes Where:			Hours per week:	
Please make note of any speci	al awards or other recog	nition(s) you wish	to share:	
Certification The information in my applications and wrote the essay Student Signature	, ,	·	·	
Parent/Guardian Signature Required if student/applica	nt is less than 18 years old at	the time of applicatio	Date: n.	