

2026



Three \$1,000 Scholarships To Be Awarded

S C H O L A R S H I P

Scholarship Applicant Eligibility:

- **Applicant must be a current high school senior and Member of The Atlantic Federal Credit Union or open an account at the time of applying for the scholarship.**
- **Attach an official high school transcript that includes a cumulative GPA of completed marking periods as of date of submission.**
- **Applicant will not be eligible unless all information is submitted by April 10, 2026 deadline.**

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Parent/Guardian: _____

Name of High School: _____

Name of Institution You Plan to Attend: _____

☐ 4-Year College/University ☐ Community College ☐ Technical School

Intended Major: _____

Tell Us About Yourself

Please list your academic achievements and awards, community service involvement, and extracurricular activities in the spaces provided below. If applicable, please also indicate if you took on a leadership role or held a leadership position for each activity.

Academic Achievements/Awards

Leadership Role/Position

1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

Community Service

Leadership Role/Position

1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

Extracurricular Activities (sports, clubs, organizations, jobs, etc.)

Leadership Role/Position

1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

Attachments:

- **Up to three (3) letters of recommendation (by teachers, guidance dept., clergy, employers, etc.).**
- **An official high school transcript that includes a cumulative GPA of completed marking periods as of the date of submission. In addition, attach any supporting information on grading scales/policies. (*See section below.*)**
- **A brief essay (up to 500 words/1 page) describing a time you were challenged and how you overcame it.**

For Your Guidance Department

Please advise whether any changes were made in terms of grading scales and policies which we should take into consideration due to adjustments and/or limitations imposed by the pandemic.

This application must be completed and returned via email by **April 10, 2026** to:

Carla White–Garrett
Email: carlag@atlfedcu.com
Phone: 908-245-1750 ext.7512

For more info on the Atlantic Federal Credit Union, visit **TheAtlanticFCU.com**.

Certification and Release Authorization

I certify that the information in this application is true, complete, and accurate and that I am a Member in good standing of the Atlantic Federal Credit Union. I authorize the release of my information for the purpose of confirming the validity of this application.

Should I become a recipient of an Atlantic Federal Credit Union Scholarship, I authorize photo content of me to be used for credit union media purposes.

Parent/Guardian Signature: _____

Student Signature: _____