



WHITEROSECU.COM | (717) 755-9773 | TOLL FREE (888) 755-9773

## White Rose Credit Union Scholarship Application

Please Print or Type

Date Received: \_\_\_\_\_ (Credit Union use only)

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name of Parent or Guardian: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_

I have been a Member of White Rose Credit Union since \_\_\_\_\_

My account number is \_\_\_\_\_

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**Applicant is currently enrolled at:**

High School Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

**College or University applicant will attend\* or is attending:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

*\*Attach copy of your Letter of Acceptance*

It's your life. We care.

Corporate Office: White Rose Credit Union | 3498 Industrial Drive | York, PA 17402  
East York | Downtown | Dallastown | West York



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**1.) List any other academic achievements you feel are important to this application:**

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**2.) List other school activities in which applicant has participated:**

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**3.) List community activities, service organizations, etc., outside of school in which applicant has participated. Indicate any offices held:**

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**4.) Provide a declaration of career goals: (attach additional pages as necessary)**

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**5.) List and attach three (3) letters of reference or recommendation. (Note: One of the three must be from your high school guidance counselor.)**

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**6.) Attach TYPED Essay discussing the role of Credit Unions in supporting their local communities. Explore how credit unions contribute to the well-being of communities through financial services, education, and community involvement. Additionally, describe your involvement in community service or volunteer work, and how it has shaped your values and goals.**



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### CONDITIONS

Two \$500.00 scholarships will be awarded by White Rose Credit Union each year to provide students with financial assistance toward his or her college education. Plus, the prior year's recipients may be eligible for an additional \$500 scholarship toward their continuing education.

In order to qualify for the scholarship funds, the student must be enrolled in a full-time basis at any institution of higher education. Applications will not be accepted for enrollment for vocational or adult remedial education courses.

**ALL applications must be received no later than April 11, 2025 to qualify.**

### SELECTION

All essays will be judged on the basis of content, originality and the student's ability to clearly address the credit union topic they selected. The application answers will establish the character of the applicants as well as the goals and objectives in the life of the student.

**All applicants will be notified by May 23, 2025 of the scholarship winners.**

### ELIGIBILITY

Applicant must:

- Be a member of White Rose Credit Union in good standing
- Be a high school senior or high school graduate
- Be entering college as a Freshman, Sophomore, Junior, or Senior
- Carry at least 12 credit hours

Applicant should provide:

- A completed application
- A letter of acceptance from a college
- An essay on the given topic with a minimum of 500 words, typed and doubled spaced.

Applicant's name should be typed on the front page of the essay. The application, and essay must be received by **April 11, 2025**.

***2<sup>nd</sup> year returning recipients must provide the following:***

- Proof of passing grades from previous year
- Proof that they are continuing their education
- Reach out to [marketing@whiterosecu.com](mailto:marketing@whiterosecu.com) or call 717-755-9773 ext. 1133 for information on second year funding.



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### Permission Slip

I hereby grant permission to White Rose Credit Unions' Scholarship Committee to verify all information submitted, or in support of, this application. I understand the decision of White Rose Credit Unions' Scholarship Committee is final.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent or Guardian

Mail or Deliver to:

**White Rose Credit Union  
Attn: Megan Thoman - Scholarship Committee  
3498 Industrial Drive  
York, PA 17402-9050**

or

email to [mthoman@whiterosecu.com](mailto:mthoman@whiterosecu.com)



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## Consent to Use Name and Photograph\*

You have my permission to use the photograph(s) taken, as well as my name, in connection with White Rose Credit Unions' Scholarship Contest publicity, including various media, and publications of the newsletter.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Contestant

\_\_\_\_\_  
Print Name

### Candidates Under Age 18 Must Have Permission Certificate Signed

I hereby grant \_\_\_\_\_ permission to compete in the

*(Name of Contestant)*

White Rose Credit Unions' Scholarship Contest. This permission includes consent to use his or her name and photograph in connection with such contest including various media and publications of the newsletter.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Relationship

\*Each contestant entered in White Rose Credit Unions' Scholarship Contest must complete this form prior to the contest.