Application No	Credit Union U	se Only

Application No._____ Credit Union Use Only)



THE SPIRIT OF AODFCU SCHOLARSHIP APPLICATION

Applicants must be a graduating senior who has been a primary member of AOD Federal Credit Union for a minimum of one year. The SPIRIT OF AODFCU Scholarships are based on a need for Financial Assistance. Funds awarded will be paid at the beginning of the student's freshman year and will be made payable to and issued directly to the educational institution of the student's choice.

Applicant Name:	Telephone Number:
Address:	
Applicant High School:	Email Address:
Applicant AOD Federal Credit Union Account Number:	
I plan to pursue a degree/trade/certificate in:	
Educational Institution I plan to attend:	
My career goal is to:	
Tell why you have chosen to be an AODFCU member. (yo	ou may submit additional pages)
Tell why you feel you should be selected for The Spirit of pages)	. ,
Tell us about any community or volunteer work you have	
Provide any special circumstances or hardships that The smay submit additional pages)	Spirit of AODFCU Scholarship might help with. (you
Note: Applicants may also apply for the AODFCU Star o	f Excellence Scholarship
Mail Application To: AOD Federal Credit Union - Attn:	Alison Hardeman, P.O. Box 608, Bynum, AL 36253