



FOUNDATION USE ONLY:	
Date application received:	
Amount approved:	
Date application approved:	
Notification made on:	

Wisconsin Credit Union Foundation **2024/2025 Professional Development Scholarship Application**

APPLICANT INFORMATION

Name: _____ Title: _____

Credit Union: _____

Phone: _____ E-mail: _____

1) Program you are applying for: _____

Hosted by: _____

Date: _____ Location: _____

Total amount requested: \$ _____ (maximum amount \$2,500)

2) Are you a young professional (age 35 and under)?

Yes

No

3) If yes, are you a registered member of the YP Network?

Yes

No

4) How many years have you been in the credit union industry as an employee or volunteer? _____

5) Do you plan to attend this event if you do not receive this professional development award?

Yes

No

If no, why not? _____

Please respond to the following questions and limit your response to no more than 500 words.

RESPONSES TO ALL QUESTIONS IS REQUIRED – PLEASE ANSWER IN ESSAY FORMAT:

1) Why are you applying for this scholarship?

2) Consider your credit union and yourself. Describe how your attendance at this event will benefit:

- a) You

- b) Your credit union

3) Elaborate on your long-term goals in the credit union movement:

4) Tell us about your involvement in the credit union movement and community:

- a) Credit union or chapter activities

- b) Leadership positions held

- c) Community involvement/volunteer activities

Applicant Signature: _____

Title: _____ **Date:** _____

CEO/President or Board Chair Signature: _____

Title: _____ **Date:** _____

NOTE: Anything herein to the contrary notwithstanding, The Foundation reserves the right to require repayment of any scholarship or grant it awards should the credit union in question merge within a year following the date The Foundation Board takes action.

Applications are due no later than Thursday, October 31, 2024.

When completed, submit the signed application and any attachments one of three ways:

By mail: **Wisconsin Credit Union Foundation, Inc.**
 1 E. Main St., Ste. 101
 Madison, WI 53703

By email: **Foundation@TheLeague.coop**

By fax: **608-250-2606**

Please contact the Foundation at Foundation@TheLeague.coop or by phone at 608-640-4040 or 800-242-0833 with questions about this application form.