

# Anniversary Scholarship

Community First Co-operative Credit Union, formerly named the Antigua and Barbuda Teacher's Co-operative Credit Union was formed April 7<sup>th</sup>, 1959 under the leadership of Mr. Charles Sampson and a small group of teachers with the objective of ensuring that teachers and their families could operate their own financial savings co-operative.

The Credit Union later changed its name to Community First Co-operative Credit Union in 2005 to more accurately represent the new composition of its membership.

As a Credit Union started by teachers, education is very important to us. As a result, Community First Co-operative Credit Union has established an Anniversary Scholarship Fund, to provide financial assistance to members who are currently completing their tertiary education.

This Scholarship will award three (3), final year, University Students, in the amount of E.C. \$6000.00 per student, to be used to help cover final year expenses.

# **APPLICATION CRITERIA**

# Eligibility

The scholarship targets students who are enrolled in an accredited university for the final year of study leading to a first Degree (Bachelor's Degree). The applicant must be Antigua and Barbudan by birth - proof of birth will be required.

The criteria for selection include but are not limited to active membership at Community First Co-operative Credit Union, academic performance, financial need, educational and career goals, character, and extra-curricular activities. Scholarships for study at non regional institutions would be considered **only** where the course of study is **not** available at a local and regional institution.

# Area of Study

The scholarship will be for the completion of a first degree in any discipline.

# Requirements

- 1. A completed Community First Co-operative Credit Union Scholarship Application Form and all required supporting information by the deadline, as imposed annually.
- 2. Proof of cost per unit/course or assistance required.
- 3. Copy of letter of acceptance from university, or statement explaining acceptance.
- 4. Brief Statement stating educational objectives, career goals, financial need, past and current extracurricular activities and how the scholarship will help the applicant to reach his/her goals.
- 5. Interview by the Scholarship Screening Committee.
- 6. Applicants must be in good standing and have a minimum of a "B" average or GPA of 3.0, a transcript and school reference are required.
- 7. Applications should be submitted by 31st May, 2021.

## **Scholarship Award**

- 1. The scholarship will be on a one-time basis for the final year of study.
- 2. Three scholarships in the amount of E.C. \$6000.00 will be awarded annually.
- 3. Scholarship awards are to be applied towards tuition, housing and travel expenses, university fees, books, supplies and/or equipment required for the courses at the educational institution.
- 4. The award does not provide for the support of dependents either at home or overseas.
- 5. The Credit Union reserves the right to use the name and/or photograph of scholarship recipients in the promotion of Community First Co-operative Credit Union.
- 8. Scholarship Awards will be made as early as possible prior to the commencement of the semester.
- 9. The Credit Union reserves the right to change the selection criteria, rules and or regulations relating to the scholarship at any time.
- 10. Community First Co-operative Credit Union reserves the right to determine if an award will be given and its decisions are final.



# Anniversary Scholarship

# PERSONAL DETAILS

Name:	
Address:	
Telephone # :	
Email:	
Date of Birth:	(dd/mm/yy)
Gender: Male↑	
Place of Birth:	

ACADEMIC QUALIFICATIONS

# SECONDARY SCHOOL LEVEL

EXAMINING BODY: CXC/CSEC	SUBJECT	ADVANCE OR ORDINARY/G.B	YEAR	GRADE

#### **TERTIARY EDUCATION LEVEL**

EXAMINING BODY: CAMBRIDGE/ CAPE	SUBJECT	YEAR	GRADE

#### **OTHER CERTIFICATES, DEGREES, DIPLOMAS**

#### EXTRA CIRCULAR ACTIVITY INVOLVEMENT

## WORK EXPERIENCE (Please list most recent first)

EMPLOYER'S	TYPE OF	ADDRESS	POSITION HELD	PERIOD WORKED
NAME	ORGANIZATION (GOVERNMENT, PRIVATE ETC.)			

## **COURSE INFORMATION**

Name & Address of University/College/Institution you are currently enrolled:

What degree are you pursuing?
Field of Study:
Date of Commencement of Course:
Date of Expected Completion of Course:
Career Choice:
Accumulated GPA to date:

COST OF STUDY	EC\$
Economic Costs	
Tuition	
Boarding/ Lodge	
Books, Supplies, Equipment	
Other Fees	
Total	

## CURRENT FUNDING METHOD

Personal	
Family	
Other Scholarship/Awards	
Other	
Total	

\*Provide brief particulars of other Scholarships/Awards include, and duration:

EC\$

#### TRANSCRIPT

Include your official transcript with this application.

#### ESSAY

Attach an essay (typewritten, double spaced pages) that outlines your educational objectives, career goals, and how your course of choice and the scholarship will help you attain your goals. Please also give your reasons for choosing the course of study and how it will benefit Antigua & Barbuda.

#### REFERENCES

Submit two (2) letters of references—at least one academic, furnished by a faculty member.

#### **DECLARATION BY APPLICANT**

I **CERTIFY** that the statements made by me in this form are true, complete and correct to the best of my knowledge, information and belief. If awarded the scholarship, I am willing to sign a Bond to return to Antigua and Barbuda to work for at least one (1) year.

DATE:\_\_\_\_\_(DD/MM/YY)

NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

## IMPORTANT

1. This form does not guarantee selection for any scholarship.

2. Copies of academic qualifications must be included.

3. Copy of Birth Certificate and Valid Government Photo ID (Antiguan and Barbudan Passport preferred)

The Application Form together with all supporting documents must be scanned and emailed to:

t.james-roberts@cfccuonline.com and info@cfccuonline.com