# Howard J. Snortland Scholarship

### Award Application • 2024

This scholarship is named in honor of Howard J. Snortland and his 60 years of volunteer service to Capital Credit Union. He was an example of a visionary; willing to dream about what the future could hold for credit unions and furthering the credit union movement through consistent advocacy and volunteerism.



**Grow With Us** 

### HOWARD J. SNORTLAND SCHOLARSHIP APPLICATION

Capital Credit Union invites students pursuing an associate or undergraduate degree, or technical certificate, to apply for the opportunity to receive one of ten \$1,500 scholarships created to assist them in achieving their higher education goals. The scholarship can be used at any college, university or technical school during the 2024/2025 school year. All applicants must be a Capital Credit Union member with their own Share Savings Account (not just joint on an account). Capital Credit Union employees and board members, as well as their children or direct relatives (excluding siblings), are not eligible. To become a Capital Credit Union member, simply complete an application at any branch or online at capcu.org/member.

HOW DID YOU HEAR A	BOUT OUR	SCHOLARSHI	P PROGRAM?								
Branch signage											
☐My parents	Email										
Statement insert	☐ Social m	nedia									
Capital Credit Union website	e Other_										
SCHOLARSHIP ELIGIE	ILITY CHEC	KLIST									
Applicants must meet all the following cri	teria to be eligible for th	ne scholarship.									
☐I am a Capital Credit Union m	I am a Capital Credit Union member with my own Share Savings Account (not just joint on an account).										
My parent or guardian is not a	ın employee or board m	nember of Capital Credit	Union.								
I plan to attend a college, univ	I plan to attend a college, university or technical school.										
☐I will be pursuing an associate	or undergraduate deg	ree, or technical certifica	ate.								
I am not a previous recipient o	of the Howard J. Snortla	and Scholarship.									
APPLICANT INFORMA	TION										
Name (Last, First, Middle)											
Address		City, State, Zip									
Cell Phone Number		Email									
Parent/Guardian's Name	Parent/Guardian's A	ddress (if different)	Parent/Guardian's City, State, Zip								
T drong oddraiding realis	T drong Gdardian 570	adrood (ii diiiorom)	Tarons Gardian Goly, Glato, Zip								
Current High School/College		Overall Grade Poil	Overall Grade Point Average (GPA)								
Name of College/University/Technical S	chool Attending	Address of College	Address of College/University/Technical School								
Intended Major		Desired Profession	Desired Profession								
Length of time as a Capital Credit Union											
Less than 1 year 1 - 2 y	/ears	an 2 years									

### **EXTRACURRICULAR ACTIVITIES**

(student government, sports, publications, school-sponsored community service programs, student-faculty committees, arts, music, etc.)

List up to four extracurricular activities in which you participated in the last four years. List an activity only once (example: if you were in band for two years, you would list it once). You must have participated for 15 or more total hours within the school year for the activities listed. To count your hours of participation, include practices, meetings, performances and competitions. Please provide one reference (name and phone number) who can verify your level of participation in each activity you list.

1. Activity	Number of years	Total hours	<u> </u>			
Current and/or previous role(s) he	ld, if applicable					
Reference name		Reference phone number				
2. Activity	Number of years	Total hours				
Current and/or previous role(s) he	ld, if applicable					
Reference name		Reference phone number				
3. Activity	Number of years	Total hours				
	ld, if applicable					
4. Activity	Number of years	Total hours				
Current and/or previous role(s) he	ld, if applicable					
Reference name		Reference phone number				
EMPLOYMENT						
Name of business where I am emplo	yed (if any):					
Up to 9 hours per week	10-19 hours per week					
20-29 hours per week	30+ hours per week					
Name, email and phone number of a	supervisor who can verify your work his	tory:				
Name	Email	Phone number				

## PUBLIC SERVICE & COMMUNITY ACTIVITIES (HOMELESS SERVICES, ENVIRONMENTAL PROTECTION/CONSERVATION, ADVOCACY ACTIVITIES, WORK WITH RELIGIOUS ORGANIZATIONS, ETC.)

List up to four public service or community activities in which you participated in the last four years. Do not repeat items you listed as extracurricular activities. List an activity only once (example: if you were a United Way volunteer for two years, you would list it once). You must have volunteered for six or more total hours within the last four years for the activities listed. Please provide one reference (name and phone number) who can verify your level of participation in each activity you list.

Community service/volunteer activities are defined as an activity done outside of school as an unpaid volunteer to support the mission of a charitable, civic or community organization.

Name of charitable organization	Length of involvement					
Current and/or previous role(s) held, if applicable						
Describe what you did						
Reference name						
Name of charitable organization	Length of involvement					
Current and/or previous role(s) held, if applicable						
Describe what you did						
Reference name	Reference phone number					
Name of charitable organization	Length of involvement					
Current and/or previous role(s) held, if applicable						
Describe what you did						
Reference name	Reference phone number					
Name of charitable organization	Length of involvement					
Current and/or previous role(s) held, if applicable						
Describe what you did						
Reference name	Reference phone number					
Select the total number of hours you spent volunteering at the public service a you must have volunteered six or more total hours within the last four years for	or the activities listed.					
Up to 24 hours  25-49 hours  50-74 hours	T5+ hours					

### **ESSAY**

Please write a 250-300 word response to **each** of the questions on the following two pages.

### **PHOTO**

Please attach a high-quality digital photo of yourself to be used for recognition purposes in the event you receive a scholarship.

### **APPLICATION DEADLINE**

Email your completed application, current transcript and high-quality digital photo to marketing@capcu.org by 5 p.m., on Feb. 13, 2024. Completed application, current transcript and high-quality digital photo must be sent as email attachments. Links to cloud storage and/or file-sharing services (Google Drive, Dropbox, etc.) will not be accepted. If application materials are not submitted as instructed, your application will be disqualified without notification.

#### AWARD NOTIFICATION AND PRESENTATION

Scholarship recipients will be notified by telephone on or before March 6, 2024. Awards will be presented on March 13, 2024 at Capital Credit Union's Annual Meeting which will be held virtually with a free remote conferencing service.

1. Think about what you have learned about financial literacy in your formal education. How has this prepare you for financial challenges you may face in the future?	s helped

2.	Explain	the d	lifference	e betwee	en a cr	edit ui	nion a	and a	bank	and v	vhy th	e differ	ence r	natters	to you	-