

2025 Margaret Cook Scholarship Application

Higher Education Student

QUALIFICATIONS

- **The scholarship applicant must have a MCU account in good standing.**
- Transferring student into a four year university/college, adult student returning to college, masters program, doctoral program, or medical degree.
- Minimum of a 3.0 grade point average (GPA).
- Community and/or school involvement.
- American citizen.
- Applications must be submitted by April 30, 2025 (applications will not be returned).
- Credit Union employees, Board of Directors and previous winners are not eligible.

APPLICATION

- Fill out the application and submit the following supporting documents:
 - ✓ An official copy of your college transcript (if applicable).
 - ✓ A letter of recommendation from someone other than a parent/guardian who has experience working with you either through a school activity, job, or community involvement.
 - ✓ A copy of the program, certification or degree plan of the school you will be attending.
 - ✓ A one-page essay that answers the essay question found on the following application.
- Applications and supporting documents must be postmarked or turned in by Wednesday, April 30, 2025.
- Drop off your application in a sealed envelope or mail to:
 - Memorial Credit Union
 - Attn: Scholarship Committee
 - 7789 SW Freeway, Suite 175
 - Houston, TX 77074
- When your application is received, we will email you a confirmation of receipt within 7 business days.

YOUR APPLICATION WILL NOT BE CONSIDERED IF IT IS:

- ✗ **Late.** Application and supporting documents must be turned in or postmarked by Wednesday, April 30, 2025.
- ✗ **Incomplete.** Applications must be completely filled out and sent with ALL supporting documents; incomplete applications will be filed with no action taken and no notification to the applicant.
- ✗ **Unqualified.** Applicants must meet ALL of the qualifications listed above.

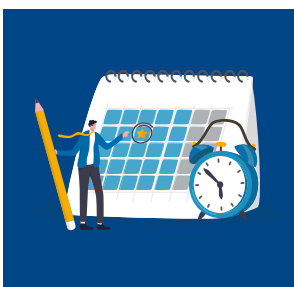
IMPORTANT DATES

- Application/postmark deadline: Wednesday, April 30, 2025.
- Winners will be notified: End of May

QUESTIONS?

Please contact Tricia Macaulay at tmacaulay@memorialcu.org or 713.778.6361

Memorial
CREDIT UNION
growing your financial health



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Full Name _____ Account # _____

Address _____

City _____ State _____ Zip _____

Email Address _____ Phone Number _____

Current School/College/University _____ GPA _____

School Address _____

City _____ State _____ Zip _____

School Phone Number _____

Degree Completed (if applicable) _____ Graduation Year (if applicable) _____

Name of the College or School you Plan to Attend in the Fall _____

Proposed Field of Study _____

Marital Status _____ Number of Dependents _____

While scholarships are not awarded solely based on financial need, it is a factor that the scholarship committee will consider. Are you receiving financial assistance for education expenses from any other source?

Yes No (check one)

If yes, please list sources: _____

Please state your planned career goals. _____

Please state any school and/or community activities in which you participate. These may be, but are not limited to, church, volunteering, school activities or other experiences. List the amount of time you've participated in the activity and any honors you may have received.

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Please list any employment experience you have, beginning with your most current position:

Employer	Dates Employed	Position
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

This scholarship is named after Margaret Cook who worked for the Memorial Hermann System for over 40 years and served on the Board of Directors at Memorial Credit Union for many years. Margaret was extremely dedicated to serving others. Every day. With that in mind, please include a one page essay answering the following question:

How will your education and proposed career help you serve others?

I certify that all information provided on this application and all supporting documents are accurate and complete. I understand that any misleading or false information will result in my application being disqualified. If selected as a scholarship winner, I give full consent for the use of my name and photograph to be used for promotional and publicity purposes. I understand that the decision of Memorial Credit Union's Scholarship Committee is final.

Applicant Signature _____ Date _____



www.MEMORIALCU.org

Scholarships will be awarded without regard to race, color, creed, gender or physical disability. Credit Union employees, Board of Directors and previous winners are not eligible. Applications must be in a sealed envelope and turned in or postmarked by April 30, 2025.

