



## 2019 Bathanti-D'Agostino Memorial Scholarships

**Preface** It is the belief of Motor City Co-op Credit Union and Motor City Consumers Cooperative that Bathanti-D'Agostino Memorial Scholarships will encourage and assist recipients to further their education and, through the benefits of the program, make significant contributions to society and the community in which they will eventually reside.

**Awards** Scholarships are awarded on the basis of scholastic ability and community involvement. Up to five scholarships of \$2000 each may be awarded. The Scholarship Selection Committee shall consist of Motor City Consumer Cooperative Board of Directors and/or Motor City Co-op Credit Union management. The Scholarship Award will be sent directly to the college or university, at which the recipient will enroll, to be credited to the recipient's account, and used in accordance with the scholarship and financial aid policy of the college or university.

**Qualifications** To qualify for the scholarship, applicants must:

- (a) All applicants will receive membership to Motor City Co-op Credit Union and the \$13 membership fee will be waived.
- (b) Be a high school senior who will be graduating during the current academic school year, and is eligible to enter a college or university of their choice during the forth-coming academic year.
- (c) Be able to demonstrate to the satisfaction of the Scholarship Selection Committee a distinct aptitude for higher education, in addition to significant academic and social achievements during the applicant's high school education. Employees and their families of Motor City Co-op Credit Union and Motor City Consumers Cooperative, Inc. are not eligible.

**How to Apply** To be considered for a scholarship, all applicants must submit:

- (a) A completed application for scholarship no later than Monday April 1, 2019.
- (b) A 2018/2019 high school transcript.
- (c) Two (2) letters of recommendation from a teacher, counselor, employer or community leader.
- (d) A resume that includes academic achievements, extracurricular activities, and employment history.
- (e) A typed essay of 500-1000 words explaining what you personally do that exemplifies the credit union philosophy of "People Helping People".

The receipt of this scholarship application will be acknowledged and notification of the outcome of scholarship awards will be provided to all participants by Wednesday May 1, 2019.

**IMPORTANT:** It is your responsibility to apply for, and gain admission to, the college or university you select. Submitting this Bathanti-D'Agostino Memorial Scholarship Application does not constitute an application for college admission.



## 2019 Bathanti-D'Agostino Memorial Scholarship Application

**Please submit application, essay and transcripts by mail to:**

Bathanti-D'Agostino Memorial Scholarship  
37321 Garfield Road  
Clinton Township, MI 48036

**Email to:**

scholarships@motorcitycoopcu.com

(Please type or print)

Full Name \_\_\_\_\_  
(Last) (First) (Middle Initial)

Home Address \_\_\_\_\_  
(Street Number) (City) (State) (Zip)

Phone \_\_\_\_\_ Date of Birth \_\_\_\_\_  
(Area Code and Number) (Month/Year)

Email Address \_\_\_\_\_

Name of High School Attending \_\_\_\_\_ Graduation Date \_\_\_\_\_  
(Month/Year)

### Scholarship Checklist

Make sure to include the following when submitting for the scholarship:

- |   |  |
|---|--|
| <input type="checkbox"/> Signed Application   | <input type="checkbox"/> Transcript                    |
| <input type="checkbox"/> Essay                | <input type="checkbox"/> Resume                        |
| <input type="checkbox"/> Signed Press Release | <input type="checkbox"/> Two Letters of Recommendation |

Signature of Applicant \_\_\_\_\_

Signature of Parent/Guardian (if recipient is a minor) \_\_\_\_\_



**Bathanti–D’Agostino Memorial Scholarship  
Public Relations and Photo Release**

\*If you are selected as a recipient of our scholarship, a photo will be requested or required.

I, \_\_\_\_\_, a recipient of the Bathanti-D’Agostino Memorial Scholarship, grant permission to Motor City Consumers Cooperative and Motor City Co-op Credit Union to use my name and photo and to disclose the awarded amount in publications and/or public relation releases. I understand that neither Motor City Consumers Cooperative nor Motor City Co-op Credit Union will release private or personal information about my account/s or me.

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Recipient \_\_\_\_\_ Date \_\_\_\_\_

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Parent/Guardian (if recipient is a minor) \_\_\_\_\_ Date \_\_\_\_\_