

# 2020 - 2021 Scholarship Application

RVA Financial is awarding one \$1,000 scholarship to a member or a dependent of a member to encourage the pursuit of higher education. The applicant must be a senior in high school who will attend a college, university, or trade school immediately following high school, or currently attending a college, university, or trade school on a full-time basis. This scholarship is not open to employees or volunteers of RVA Financial, or their immediate family or household members, to include spouses, domestic partners, parents, grandparents, children (including natural, step, and adopted), grandchildren (including natural, step, and adopted), brothers, sisters, mothers-in-law, fathers-in-laws, brothers-in-law, sisters-in-law, daughters-in-law, and sons-in-law.

Please mail or hand-deliver all applications to RVA Financial, ATTN: Scholarship Committee, 1700 Robin Hood Rd, Richmond, VA 23220. Applications must be received by our close of business (5:00 PM Eastern Time) on <u>Friday, May 15, 2020</u>.

The award recipient will be announced on or around Friday, June 4, 2020.

## **APPLICATION CHECKLIST**

- High School transcript including GPA and SA scores, or college transcript.
- A copy of your Student Aid Report (SAR) with the Expected Family Contribution noted. You may reprint this by going to www.fafsa.gov.
- A personal statement using a minimum of 50 words to a maximum of one (1) page explaining who you are, your goals, and how the scholarship will help you obtain your goals. Attach the statement to this page.
- The 2020-2021 Scholarship Application (Pages 1 and 2).

My RVA Financia	l account number is	·	
APPLICANT'S NAME	E:		
	Last	First	Middle
ADDRESS:			
	Street		Apt. # (if applicable)
	City	State	Zip Code
HIGH SCHOOL/CO	LLEGE PRESENTLY ATTENDING: _		
COLLEGE PLANNIN	IG TO ATTEND:		
PARENT/GUARDIA	N:		 Relationship
			Retacionsinp
TELEPHONE:	Day	Evening	
Student's Email A	ddress (if available)		

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# I. EMPLOYMENT HISTORY DURING THE PAST THREE YEARS (FULL OR PART-TIME):

Type of Work	Dates /# months	Employer/Supervisor	Telephone
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## II. COMMUNITY SERVICE-VOLUNTEER:

Name of Organization	Year in School		Year in School		School Position Held	Position Held	Sponsor
	1	2	3	4			

## III. EXTRACURRICULAR ACTIVITIES:

Name of Activity	vity Year in School		ool	Position Held	Sponsor	
	1	2	3	4		

I certify that I am eligible for this scholarship and the information provided is true to the best of my knowledge. I understand that if I am awarded the scholarship, the funds will be remitted directly to my school for the benefit of my student account. Further, I acknowledge that if I do not complete at least one full semester, RVA Financial will require the school to return the scholarship funds.

Signature Date

If you have any questions, please call Cindy Lindsey at RVA Financial:

(804) 359-8754, ext. 3172.

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