EDWARD CIALELLA MEMORIAL SCHOLARSHIP AWARD 2023 APPLICATION

| Applicant's Name: | |
|--|-------------------|
| Address: | |
| | |
| E-Mail: | Phone: |
| Date of Birth: | Last Four of SS#: |
| High school or school you currently attend: | |
| List post-high school institutions you have been accepted or will be attending this coming year. | |
| | |
| | |

Please mail your completed application by April 14, 2023 to your credit union or mail to:

FIRST CHOICE FEDERAL CREDIT UNION
2209 W. State Street
New Castle, PA 16101

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Scholarships deemed completed other than by the student will be disqualified.

| Applicant's Last 4 of SS# | (DO NOT include your name on this or attached pages) |
|--|---|
| | omitting your endorsement to allow the credit and likeness (if applicable) to announce you as a |
| Please limit these experiences to | r school activities, work, or volunteer experiences. the most recent three years past. Please let us d for any of these efforts and what you learned |
| typed, double spaced, with font name anywhere on the essay. Pl security number on each page in | y question, worth 40 points, on a separate sheet, size no smaller than 11. Please DO NOT list your lease place the last four digits of your social the header or footer of the page. Failure to do so (Limit your response to no more than 3 pages.) |
| Discuss your career goals | s and how you plan to achieve them. |
| What obstacles | will you have to overcome? |
| How can y | our credit union help? |