



***PRESTON FEDERAL CREDIT UNION ROBERT F. MILLER MEMORIAL  
SCHOLARSHIP APPLICATION***

*Please type or print clearly. All sections must be completed unless otherwise noted.*

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**APPLICANT INFORMATION**

**Full Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Mailing Address:**

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

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**ACADEMIC INFORMATION**

**Current School Name:** \_\_\_\_\_

**School Address:** \_\_\_\_\_

**Current Grade Level / Year:** \_\_\_\_\_

**Expected Graduation Date:** \_\_\_\_\_

**Current GPA:** \_\_\_\_\_ (on a \_\_\_\_\_ scale)

**Intended College / Program of Study (if known):**

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## ACTIVITIES, WORK EXPERIENCE & COMMUNITY INVOLVEMENT

*(Attach additional pages if necessary)*

**Activity / Employer Name:**

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**Dates of Participation/Employment:** \_\_\_\_\_

**Position / Role:**

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**Description of Responsibilities & Achievements:**

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## ESSAY SECTION

Please respond to the following questions. You may attach additional pages if needed.

- You may wish to include educational goals and any unusual circumstances (financial, personal, etc.)
- Briefly describe why you choose the College or Trade School.
- Supply information that may be of assistance in considering your application – Have you qualified for the Promise Scholarship?

### Essay Question 1

**Why are you applying for this scholarship and how will it help you achieve your educational goals?**

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**Essay Question 2**

**Describe your future career goals and how your education will help you achieve them.**

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**FINANCIAL / ADDITIONAL INFORMATION (IF APPLICABLE)**

Please describe any financial circumstances or additional information you would like the committee to consider:

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Parent or Guardian(s) Name(s): \_\_\_\_\_

Occupation(s): \_\_\_\_\_

**REFERENCE INFORMATION**

**Reference Name:** \_\_\_\_\_

**Relationship to Applicant:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

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**CERTIFICATION & SIGNATURE**

I authorize the high school to release the information on this scholarship application to a committee(s) that will use it to determine the recipient for a scholarship.

I certify that all information provided in this application is true and complete to the best of my knowledge. I understand that providing false information may result in disqualification.

**Applicant Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

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## **SUBMISSION INSTRUCTIONS**

Please submit the completed application along with any required attachments by:

**Submission Deadline:** April 26, 2026

### **Submission Method and Address/Email:**

- Email – cumember@prestonfcu.com
- Mail – Preston Federal Credit Union, Benefits Committee, 434 E Main Street, Kingwood, WV 26537
- In-Person – 434 E Main Street, Kingwood, WV 26537

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