SOUTHEASTERN REGIONAL
CREDIT UNION SCHOOL

Southeast Management School Scholarship Application

APPLICANT INFORMATION

Applicant Name: _____

Credit Union Name: _____

Full Address: _____

Direct Phone Number: _____

Mobile: _____

Email Address: _____

CREDIT UNION ASSET SIZE

◉ Less than $25 M ○ $25 - $50 M ○ $50 - $100 M ○ $100 - $250 M

WORK EXPERIENCE AND BACKGROUND

Current Position at Credit Union

☐ Volunteer ☐ CEO/Senior Staff ☐ Mid-Level Staff

☐ Staff Other: _____

Other Positions Held (Professional, Chapter, League, National, Other)

Number of Years Worked/Volunteered in the Financial Services Industry

◉ 1 – 3 yrs. ○ 4 – 6 yrs. ○ 7 – 9 yrs. ○ Over 10 yrs.

CREDIT UNION PROFESSIONAL DEVELOPMENT, DESIGNATIONS, OR CERTIFICATIONS

☐ CCUE ☐ CUCO ☐ DE ☐ CCUFC ☐ CUCME

OTHER: _____

Will you receive assistance from your credit union or other source? (yes/no) Yes

Other Source: _____

Will you lose wages while attending school? (yes/no) Yes

Will you lose vacation time to attend? (yes/no) Yes

Have you received a scholarship before? (yes/no) _____

Scholarship Awarded: _____

ESSAY

Explain what you hope to gain from your attendance at the **SE Management School** and why you feel you should be awarded a scholarship. *Please provide at least 3 – 5 sentences.*

Signature: _____

Return completed application, letter of recommendation,
and CU year-end financial statement to:

development@carolinasleague.org by APRIL 30, 2027