



To be eligible for the scholarship, you must:

- Be a current member of Los Angeles Federal Credit Union (but not a LAFCU employee nor a family member of an employee).
- Be a teacher in good standing at the campus of an accredited California high school, college, or trade school.

The following items are needed to be considered for a scholarship:

- Employer verification indicating that applicant is currently teaching at a California school. Verification could be a letter from the school principal or administrator.
- A list of programs or activities applicant has launched in his/her classroom or school to foster student learning in the area of financial literacy, if you have done this, or any other area of learning.
- An outline of community service or involvement.
- Write a typed, one-page double-spaced essay that answers the following question: *If you were to teach a course in financial literacy in your classroom, how would you structure it and what lessons would you like to convey to your students?*

• Mail your application along with all required documents to:
Scholarship Committee (c/o Mktg Dept-Teachers) • Los Angeles Federal Credit Union • P.O. Box 53032 • Los Angeles, CA 90053-0032

• Alternately, you could choose to email your application & all documentation in PDF format to morozco@LAFCU.org by the deadline.

All entries must be brought into a branch, postmarked, or emailed by April 30, 2020. The LAFCU scholarship selection committee will make all award decisions and the winners will be notified by May 22, 2020. For questions, call (877) MY LAFCU, ext. 6466 or e-Mail: morozco@LAFCU.org.

Two total teacher scholarships at \$1,000 each will be awarded.

Teacher Information (applicant):			
Name: _____			
First	Middle Initial	Last	
Address: _____			Apt.# _____
City: _____		State: _____	Zip: _____
Telephone #: () _____		e-Mail: _____	
Name(s) on LAFCU Account _____		LAFCU Account # (6-digits) _____	Birth Date _____
School or College where you teach (and address): _____			
Address _____		City _____	State _____ Zip _____

Signature of Applicant (Teacher) _____
Date

FOR LAFCU USE ONLY: Date Received:	Rcvd by:
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