

**2023 ELSIE P. KINNEY MEMORIAL
SCHOLARSHIP DRAWING**

**ENTRY FORM MUST BE SUBMITTED AT THE
CREDIT UNION ON OR BEFORE JUNE 2ND, 2023.**

STUDENT NAME _____
ADDRESS _____

CREDIT UNION MEMBER **YES** _____ **NO** _____

PARENT NAME _____

ADDRESS _____

PHONE # _____

**NAME AND ADDRESS OF RELATIVE WHO IS CURRENTLY A
MEMBER OF THE CREDIT UNION**

**SCHOOL NAME THAT THE STUDENT WILL BE GRADUATING
FROM IN 2023**

NAME OF THE COLLEGE YOU WILL BE ATTENDING

**PLEASE INCLUDE YOUR ACCOMPLISHMENTS AND
PARTICIPATION IN HIGH SCHOOL AND YOUR GOALS FOR
THE FUTURE.**