



SMALL CREDIT UNION SCHOLARSHIP APPLICATION

Complete and send application to Gina Evans
Kansas Credit Union Association, 650 S. Westdale Drive, Suite 100, Wichita, KS 67209

Please type or print clearly

Name: _____

Credit union: _____

Present position at the credit union: _____

Credit union address: _____

Phone: _____, ext. _____

Email address: _____

Webinar/Teleconference you would like to participate in: _____

Date of webinar/teleconference: _____

How will your participation in this webinar/teleconference contribute to your professional development?

How will your participation in this webina/teleconference benefit your credit union? _____

The amount requested to participate in the webinar/teleconference: \$ _____

Signature of Applicant Date

Signature of credit union supervisor or general manager, Date
Authorizing you to participate in the webinar/teleconference you have listed.

