



## LGFCU School of Government Scholarship Award

Sponsored by Local Government Federal Credit Union  
Administered by Carolinas Credit Union Foundation, Inc.  
In conjunction with the UNC School of Government

## LGFCU School of Government Scholarship Application and Instructions

Thank you for your interest in the LGFCU School of Government (SOG) Scholarship Award. This program is offered to help nurture the career development of Local Government Federal Credit Union (LGFCU) members employed in North Carolina local government. The SOG at The University of North Carolina at Chapel Hill helps public officials and citizens understand and improve state and local government through educational, advisory and research services. State appropriations, local government membership dues, private contributions, publication sales, course fees and service contracts support the school's programs and activities. Visit [www.sog.unc.edu](http://www.sog.unc.edu) for information on SOG publications, faculty, research, courses, programs and services, and links to other useful government-related websites.

**Please read all instructions carefully. Incomplete applications will be withdrawn from consideration. All applicants must be members of Local Government Federal Credit Union.**

Applicants must independently register for a class, conference or seminar through the SOG prior to applying for a scholarship. Funds will not be awarded on a reimbursement basis for completed classes, conferences and seminars. The Master of Public Administration program is **not eligible** for funding through this scholarship. LGFCU employees, directors and/or family members, or members of the Scholarship Selection Committee, are not eligible for this award.

Scholarships will be applied **only** to the cost of tuition for classes, conferences and seminars through the SOG. Selection of recipients is to be made by the SOG Scholarship Selection Committee. The committee will meet three times each year, or until funds are expired, to evaluate applications. Funds are limited, therefore applications should be submitted as soon as possible prior to each deadline. Applications are accepted throughout the year, with deadlines of April 1, August 1 and December 1, respectively. The decisions of the SOG Scholarship Selection Committee are final.

# Application Procedures

Applicants must submit a completed scholarship application form (must be printed or typed) and a reference from an immediate supervisor, or city, town or county manager. Applications will be accepted on a rolling basis, as the committee will meet periodically to award funds. Completed applications and references **must be received** by the deadline dates listed on page one of this application, and mailed to:

## **LGFCU**

SOG Scholarship Award Program  
323 West Jones Street, Suite 600  
Raleigh, North Carolina 27603

To ensure your application is received by the deadline, we suggest you send it via certified mail with a return receipt. Should there be any questions regarding the application process, please contact the Credit Union at 877.367.5428 or by e-mail at [info@lgfcu.org](mailto:info@lgfcu.org).

Your Credit Union wishes each of you the best. We appreciate the opportunity to assist in your career development.

### **Application Checklist**

All applications require:

- You be a member of Local Government Federal Credit Union
- A completed application **received by the deadline date**
- A completed reference (mailed by your reference) **received by the deadline date**
- Prior registration for the SOG course associated with the application



LGFCU School of Government Scholarship Award

Applicant must be a member of Local Government Federal Credit Union

General Information (All information must be printed or typed)

Form fields for personal information: FIRST NAME, MIDDLE INITIAL, LAST NAME, HOME ADDRESS, CITY, STATE, ZIP, SOCIAL SECURITY NUMBER, HOME (PRIMARY) PHONE, WORK PHONE.

Employer Information

Form fields for employer information: PLACE OF EMPLOYMENT, ADDRESS, CITY, STATE, ZIP, YOUR POSITION TITLE, YEARS IN CURENT POSITION, YEARS IN LOCAL GOV'T.

Course Information

Form fields for course information: COURSE NAME, COURSE DATES, COURSE TUITION.

Please use the following lines to explain how the above listed course will enhance your career, as well as any special financial needs that may apply. You may attach additional typed sheets if necessary.

Certification

All of the information on this application is true and complete to the best of my knowledge. I agree to give proof of the information supplied on this form, if required. My signature certifies that all information is complete, factually correct and honestly represented. I understand that any falsification of information on this application could jeopardize any assistance offered. Additionally, I hereby grant permission for the use of my name and information contained in my application in any future publicity for the scholarship fund.

Form fields for signature and date: SIGNATURE OF APPLICANT, DATE.



LGFCU School of Government Scholarship Award

Reference (All information must be printed or typed)

To be completed by the applicant:

Please fill out the top section, then forward this page to your immediate supervisor, or city, town or county manager to complete.

NAME OF APPLICANT

NAME OF REFERENCE

DATE

The following statement must be signed by the applicant:

Under Public Law 93-380 (Family Educational Rights and Privacy Act), I waive the right to inspect this confidential recommendation before it becomes part of my application for the LGFCU School of Government Scholarship Award through Local Government Federal Credit Union.

SIGNATURE OF APPLICANT

DATE

To be completed by the reference:

The person above is applying for the LGFCU School of Government Scholarship Award. The information requested below will be used for the sole purpose of evaluating scholarship requests. Any additional information you would like to provide may be attached. We ask that you do not allow the applicant to review this document once completed. Thank you for taking the time to provide this helpful information. The completed reference must be received by the deadline date and mailed to:

LGFCU

SOG Scholarship Award Program
323 West Jones Street, Suite 600
Raleigh, North Carolina 27603

1. Please describe the quality of work of the applicant.

2. Please elaborate on the applicant's potential on the job.

3. Briefly describe how this course will enhance the applicant's ability to perform the functions of their job.

COMPLETED BY

TITLE

SIGNATURE

DATE