

Security First Federal Credit Union
Annual Scholarship Program



Applicant's Security First Credit Union account number: _____

☐ **College-Bound Applicant** (Graduating High School Senior) ☐ **College-Edition Applicant**

How did you hear about our scholarship: ☐ In-Branch ☐ Statement Notice ☐ Facebook

☐ Instagram ☐ TikTok ☐ My School ☐ Other _____

First Name: _____ M.I.: _____ Last Name: _____

Primary Phone Number: _____ Alternate Phone Number: _____

Date of Birth: _____ Email Address: _____

Permanent Address: _____
(Street) (City) (State) (Zip)

COLLEGE-BOUND SECTION ONLY -----

High School Name: _____

Which postsecondary institution do you plan to attend for the Fall 2026 academic school year?

School Address: _____
(Street) (City) (State) (Zip)

What degree/major will you be pursuing? _____

COLLEGE-EDITION SECTION ONLY -----

Post-Secondary Institution's Name: _____

☐ In-person ☐ Online ☐ Hybrid What degree/major are you pursuing? _____



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School Address: _____
(Street) (City) (State) (Zip)

EXTRA-CURRICULAR ACTIVITIES

Please provide the last five organizations/positions you have been involved, if any:

Organization/Club	Elected Position <i>(If applicable)</i>	Dates Active
_____	_____	From _____ to _____
_____	_____	From _____ to _____
_____	_____	From _____ to _____
_____	_____	From _____ to _____
_____	_____	From _____ to _____

COMMUNITY INVOLVEMENT

Please provide the last five community organizations you have been involved, if any:

Activity	Accumulated Hours	Dates Active
_____	_____	From _____ to _____
_____	_____	From _____ to _____
_____	_____	From _____ to _____
_____	_____	From _____ to _____
_____	_____	From _____ to _____

HONORS AND AWARDS

Please provide the last five honors/awards received, if any.

Title	Basis for Award	Years Award
_____	_____	_____
_____	_____	_____



WORK HISTORY - PAID OR VOLUNTEER

Please list jobs you have held or are currently holding. Provide a brief description of your position and responsibilities, dates of employment, and hours worked weekly, monthly, or annually.

Business:

Position: _____

Date: from _____ **to** _____

Hours Worked: ____ ☐ Weekly ☐ Monthly ☐ Annually

Responsibilities:

Business:

Position: _____

Date: from _____ **to** _____

Hours Worked: ____ ☐ Weekly ☐ Monthly ☐ Annually

Responsibilities:

Business:

Position: _____

Date: from _____ **to** _____

Hours Worked: ____ ☐ Weekly ☐ Monthly ☐ Annually

Responsibilities:

EXTENUATING CIRCUMSTANCE (OPTIONAL)

Please explain below. Note: This section is only if you have an extenuating circumstance you would like to include. It is **NOT** for the required essay.

SUBMISSION OPTIONS:

ONLINE

Be prepared to upload all required documents at the time of submitting the application. There is no option to save for later. Visit securityfirstcu.com/scholarship-program to apply. The deadline to submit is **11:59 PM on January 31, 2026**

MAIL

Must be postmarked by **January 31, 2026**. Please mail to:

SECURITY FIRST FEDERAL CREDIT UNION

Scholarship Program

ATTN: Marketing Department

PO BOX 4829

McAllen, TX 78502

EMAIL

Must be received via email by **11:59 PM on January 31, 2026**. Please email:

marketing@securityfirstcu.com. **Subject Line:** Scholarship Application – (Your Full Name).

DROP-OFF

We have nine convenient locations throughout the Rio Grande Valley. Must be dropped off no later than **January 31, 2026, at 12:30 PM, Attention: Marketing Department / Scholarship Application. Please note that some SFCU branch locations are closed on Saturday. Please visit [Branch Locations](#) to learn more.**

CERTIFICATION

I certify that all information provided on this application and all supporting documents are accurate and complete. I understand that any misleading or false information will result in my application being disqualified. If selected as a scholarship winner, Security First Federal Credit Union reserves the right to use the chosen applicant's name and any likeness thereof for promotional purposes, including, but not limited to, social media, print, and web.

Applicant's Signature

Date

Parent/Legal Guardian Signature (if applicant is under age 18)

Date

