



## **NISCUE SCHOLARSHIP APPLICATION**

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*Name* \_\_\_\_\_ *State* \_\_\_\_\_

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*Address (for reimbursement purposes)* \_\_\_\_\_

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*Business Telephone* \_\_\_\_\_ *Email* \_\_\_\_\_

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*Name of Training Event* \_\_\_\_\_ *Date(s)* \_\_\_\_\_

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*Purpose of Training* \_\_\_\_\_

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*Are you requesting a scholarship for:*

*Registration* \_\_\_\_\_

*Airfare* \_\_\_\_\_

*Lodging* \_\_\_\_\_

*(Check all that apply)*

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*Signature of Applicant* \_\_\_\_\_ *Date* \_\_\_\_\_

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*Signature of Supervisor* \_\_\_\_\_ *Date* \_\_\_\_\_

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Please fax to: (703) 528-3248, or email to [doug@nascus.org](mailto:doug@nascus.org)

*The National Institute of State Credit Union Examination (NISCUE) sponsors training for state examiners to foster the NASCUS mission of advocating for a safe and sound credit union system.*