



## RTE Credit Union Ltd

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### The John Kelly Scholarship 2026/2027 Application Form

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Membership No.: \_\_\_\_\_ Contact Number: \_\_\_\_\_

Name of Third Level Institution: \_\_\_\_\_

Date accepted/paid: \_\_\_\_\_ Course Title: \_\_\_\_\_

Course Duration: \_\_\_\_\_

Course Commencement Date: \_\_\_\_\_

Qualification Awarded: \_\_\_\_\_

I hereby confirm that the details given above are correct. I agree to abide by the rules of the Scheme.  
I accept that the decision of the Board of Directors in relation to eligibility shall be final.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### FOR OFFICE USE ONLY

Date Joined \_\_\_\_\_ Share Balance \_\_\_\_\_

Savings Record (per week/fortnight/monthly) \_\_\_\_\_

Institution/Course Approved \_\_\_\_\_