## William Power Charitable Trust Scholarship Application Greenfield Banking Company Trustee

This Trust awards scholarships "for students who graduate from high schools located in Jasper County, lowa to attend colleges of their choice, the recipient or recipients to be determined by the Advisory Council hereafter appointed." Awards "shall be based not primarily upon academic excellence but rather upon the recipient's need for such scholarship." The scholarship may be renewed, if appropriate, but student must **re-apply** each year."

The deadline to submit applications to the Trustee is **March 15th**, for the following academic year.

STUDENT INFORM	ATION				
Name:					
Last		First	Middle		
Social Security #	Date of Birth:		Place of Birth		
Email:	Driver's License or ID #		Phone # _	Phone #	
Home Address:					
Street		City	State	Zip	
School Address					
Stree		City	State	Zip	
	of school in which you have partic other extra-curricular activities:	cipated during the last t	nree years. Include p	ositions h	
ist special honors of	r recognitions you have received:				
Expected date of col	ege graduation:	Major or cour	se study:		
•	lege graduation:				

## **SPOUSE INFORMATION (If Applicable)** Name: \_\_\_\_\_ First Middle Last Social Security # \_\_\_\_\_ Date of Birth: Monthly Gross Income: Occupation: PARENT/GUARDIAN INFORMATION Father/Guardian Middle Last First Address: Street City State Zip Date of Birth Occupation: Annual Gross Income Mother/Guardian First Middle Last Address Street State Zip City Date of Birth Occupation:\_\_\_\_\_ Annual Gross Income **Siblings** Names, ages and schools attended by brothers and sisters (attach additional pages as necessary) School or College Years Completed Name Married Age ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No Any unusual financial burdens of family (attach additional pages if needed): Is anyone dependent on you for financial support? Yes No If yes, please provide additional information

STUDENT'S FINA	ANCIAL INFORMATIO	DN			
Are you eligible to	o receive a 21 <sup>st</sup> Cent	ury Scholarship?	Yes □ No		
List anticipated ex	xpenses for the year	·:			
College	Tuition	Room & Board	Other Expenses	Total 	
List Sources (fami		ings/scholarships/loa	ans, etc.) and amounts of	income available to you for a	
Source	Amo	unt So	ource Am	Amount	
			<del></del>		
		s information is accurate a		er knowledge, and that providing	
release any and all co reasonably believes a	onfidential information o	n this application to those ardian of said applicant, u	e individuals (previously identifi	reenfield Banking Company (GBC) may ed on this application) whom GBC notifies GBC in writing that such	
applicant's confidenti	ial information in the po	ssession of the postsecon		nat GBC shall have access to the is expected to enroll (or is actually cation.	

In addition to completion of **ALL** information requested above, the following items are **Required** for your application to be complete and considered:

1. Complete FAFSA (Free Application for Federal Student Aid) Report that includes parents income and loan history, if applicable (see www.fafsa.ed.gov for details).

Student's Signature

Date

2. Transcript of High School / Postsecondary Grades.

**Student's Printed Name** 

Completed application and supporting documents must be sent by March 15th to:

Greenfield Banking Company Attn: Susan Wildey 1920 N. State Street Greenfield, IN 46140