# THE JOSEPH R. EVERY SCHOLARSHIP FUND

Completed application and all supporting documentation must be returned to:

- Your Guidance Office by Monday, March 20, 2023 or
- A C&N office by Friday, March 24, 2023

Please type or print in ink.

# **PERSONAL DATA**

NAME:		
CITY:	STATE:	ZIP:
TELEPHONE: Home: ()_	Cell: (	_)
DATE OF BIRTH:	EMAIL ADDRESS:	
FATHER'S NAME:	Cell: (	)
OCCUPATION:	EMPLOYER:	
MOTHER'S NAME:	Cell: (_	)
OCCUPATION:	EMPLOYER:	
PARENT(S) EMAIL ADDRES	S:	
NUMBER OF BROTHERS AND SISTERS:		
Are any of them attending college? If yes how many?		
If so, indicate where they are attending:		
If someone other than your pa	arents financially supports you, p	olease indicate:
NAME:	RELATIONSHIP:	
ADDRESS:		
CITY:	STATE:	ZIP:
OCCUPATION:	EMPLOYER: _	
List any unusual expenses your parent or guardian has:		

NAME:				
COLLEGE AND CAREER GOALS	1			
Name of the college you plan to att	end:			
What major will you pursue?				
What degree do you expect to rece	ive?			
What are your plans after receiving your degree?				
COLLEGE COSTS FOR YOUR FRexpenses)	RESHMAN YEAR (Do not include personal			
Tuition and Fees:				
Room and Board:				
Books and Supplies:				
PERSONAL CHARACTERISTICS				
Do you smoke tobacco?				
Do you use illegal drugs?				
Do you use alcoholic beverages? _	<del></del>			
FINANCIAL INFORMATION				
	nip it is required that you attach a copy of the Federal Student Aid (FAFSA) form which sets forth EFC).			
EDUCATIONAL INFORMATION				
GPA				
Please attach a copy of your officia	l high school transcript.			

### **ESSAY**

Please prepare a 200-250 word essay about yourself, your goals and objectives in life. The essay should be typewritten and double-spaced on a separate sheet of paper.

#### **REFERENCES**

Please attach to this application two letters of reference from organization leaders, business people or teachers who are not related to you.

NAME:	

Please attach copies of this page if additional space is needed.

# **EMPLOYMENT** (During high school years only)

Employer	Type of Work	No. of Hours Per Week	Dates of en From:	nployment To:
Example: John Doe Restaurant	Wait staff		07/01/09	to 02/15/10
COMMUNITY & VOLUNTEE Organization Name	R ACTIVITIES (Du	uring high sch		only)  f Involvement
		Per Week	Fron	n: To:
SCHOOL ACTIVITIES (Duri	Mentoring	3		09 to present
Organization/Sport	Type of Activity			Participation Years:
Example: Student Government	leadership	4	36	Fr, So, Jr, Sr

Date	Applicant's Signature	
Name of High School	Print Name	

# ONLY COMPLETED APPLICATIONS RECEIVED BY THE DEADLINE AND ACCOMPANIED BY ALL REQUIRED SUPPORTING DOCUMENTATION WILL BE CONSIDERED FOR THIS SCHOLARSHIP.

C&N Wealth Management 423 Reuter Blvd, Towanda, PA 18848 1-888-987-8784

A complete	e application package must include:
	Signed and dated Application
	FAFSA with Estimated Family Contribution
	Official Transcript
	Essay
	TWO Letters of Reference
	To type your application or for additional copies please visit:
www.cnbankpa.com/Every	