### PETER C. VAN VLACK SCHOLARSHIP

Completed application and all supporting documentation must be returned to:

- Your Guidance office by Friday, April 1, 2022
- Any C&N Branch by Monday, April 4th, 2022

Please type or print in ink

#### PERSONAL DATA

NAME:			
ADDRESS:			
CITY: STATE	E:ZIP:		
TELEPHONE: Home:	Cell:		
DATE OF BIRTH: EMAIL A	DDRESS:		
FATHER'S NAME:	Cell:		
OCCUPATION:	EMPLOYER:		
MOTHER'S NAME:	Cell:		
OCCUPATION:	EMPLOYER:		
PARENT(S) EMAIL:			
NUMBER OF BROTHERS AND SISTER	S:		
Are any of them attending college?	If yes how many?		
If so, indicate where they are attending:			
Do you live with: Both Parents: Mother: Father: Other:			
If someone other than your parents supports you, please indicate:			
NAME:R	ELATIONSHIP:		
ADDRESS:			
CITY: STATE:	ZIP:		
OCCUPATION:	EMPLOYER:		

Please attach additional sheets if needed for activities, keeping the same format

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

Employer	Type of work	No. Hours Per Week		
Example: John Doe Restaurant	Wait staff	10	20	07/01/17 to 02/15/17
Do you plan to work part time	during the colle	 de vear?		
Do you plan to work during the	U I			

#### **<u>COMMUNITY & VOLUNTEER ACTIVITIES</u>** (During high school years only)

Organization Name	Type of Activity	No. of Hours Per Week	Dates of Involvement From: To:
Example: Big Brothers/Big Sisters	Mentoring	3	10/01/17 to present

Indicate what types of activities you plan to participate in while attending college, if any?

#### **SCHOOL ACTIVITIES** (During high school years only)

Organization/Sport	Type of Activity	No. Hours Per Week	Weeks Per Year:	Number of Years::	
Example: Student Government	leadership	4	36	2	
Will you be involved in any school activities while attending college?					

#### COLLEGE AND CAREER GOALS

What major will you pursue?
What degree do you expect to receive?
What are your plans after receiving your degree?

# <u>COLLEGE COSTS FOR YOUR FRESHMAN YEAR (Do not include personal expenses)</u>

Name of college you plan to attend:
Tuition and Fees:
Room and Board:
Books and Supplies:
Total Cost:
First alternate college you plan to attend:
Tuition and Fees:
Room and Board:
Books and Supplies:
Total Cost:

Please attach a copy of tuition/cost page from the above referenced schools, your student financial aid package and any acceptance letters you have received.

#### **FINANCIAL INFORMATION**

To be considered for this Scholarship it is required that you supply the following information:

Adjusted Gross Income (AGI) (parents filing separately should list each parents' AGI):

Parents: \_\_\_\_\_

Student: \_\_\_\_\_

Expected Family Contribution (EFC) from your Free Application for Federal Student Aid (FAFSA). You are required to attach the first page of your FAFSA Electronic Student Aid Report (SAR) showing your EFC ("Viewing your processed information" upon logging into your FAFSA account will take you to the SAR.)

EFC: \_\_\_\_\_

List any unusual expenses or circumstances your parent or guardian has: \_\_\_\_\_

#### **EDUCATIONAL INFORMATION**

GPA \_\_\_\_\_

Please attach a copy of your official high school transcript.

#### <u>ESSAY</u>

Please prepare a 250-300 word essay about a time in your life that has shaped you as a person. Describe how this has influenced your chosen field of study. The essay should be typewritten and double-spaced on a separate sheet of paper

#### **REFERENCES**

Please attach to this application a total of two letters of reference, from people who are not related to you.

The first letter must be from a non-school related individual. We suggest employers, business people, and organization leaders.

The second letter must be from a teacher, coach, activity leader, or a member of the administrative staff from the school you currently attend or have formerly attended. School Personnel should use the "School District Recommendation" form, included in this application.

Date

Applicant's Signature

Name of High School

Print Name

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

C&N Wealth Management 1827 Elmira St Sayre PA 18840 570-886-8400

Completed Applications will include:

- \_\_\_\_\_ Signed and dated Application
- \_\_\_\_\_ Any Applicable Acceptance Letters
- \_\_\_\_\_ FAFSA with Estimated Family Contribution
- \_\_\_\_ Official Transcript
- \_\_\_\_ Essay
- \_\_\_\_\_ TWO Letters of Reference
  - One from member of the community One from school district ("School District Recommendation" form)

## The Peter C. Van Vlack Scholarship Fund

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#### **School District Recommendation**

Applicants: Recommendation to be completed by a <u>teacher, coach, advisor or administrator</u>

**School District Personnel**: please rate the personal qualities of this student as; outstanding, above average, average, or below average. A written recommendation is also required. Please use the space below and attach a separate sheet if necessary.

Quality	Outstanding	Above Average	Average	Below Average
Cooperativeness				
Respect				
Initiative/work ethic				
Leadership				
Personal Conduct				
Trustworthiness				
Maturity				

School District Personnel's written recommendation:

School District:		
Position:		
School District Personnel's printed	name:	
School District Personnel's signatu	re:(Signature)	(Date)