THE JOSEPH R. EVERY SCHOLARSHIP FUND

Completed application and all supporting documentation must be returned to:

- Your Guidance Office by Monday, March 18, 2024 or
- A C&N office by Friday, March 22, 2024

Please type or print in ink.

PERSONAL DATA

NAME:				
ADDRESS:		 		
CITY:	STATE:	Z	IP:	
TELEPHONE: Home: ()_	C	ell: ()		
DATE OF BIRTH:	_ EMAIL ADDRESS: _			
FATHER'S NAME:	C	sell: ()		
OCCUPATION:	EMPLC	YER:		
MOTHER'S NAME:	(ell: ()		
OCCUPATION:	EMPLC	YER:		
PARENT(S) EMAIL ADDRESS:				
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 par	ents financially support	s you, plea	ase indicate:	
NAME:	RELATIONSH	P:	<u> </u>	
ADDRESS:				
CITY:	_ STATE:	ZI	P:	
OCCUPATION:	EMPLO	′ER:		
List any unusual expenses your parent or guardian has:				

	NAME:
COLLEGE AND CAREER GOALS	
Name of the college you plan to att	end:
What major will you pursue?	
What degree do you expect to rece	eive?
	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?	
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	10	07/01/09	to 02/15/10
COMMUNITY & VOLUNTEE Organization Name	R ACTIVITIES (Du	uring high sch No. of Hours Per Week		f Involvement
Example: Big Brothers/Big Sisters	Mentoring	3		9 to present
SCHOOL ACTIVITIES (Duri		ears only)		
Organization/Sport	Type of Activity	No. Hours Per Week		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 90-92 Main Street, Wellsboro, PA 16901 1-800-487-8784

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