
Personal Information

Name: _____
Last First Middle Maiden

Address: _____

City: _____ State: ____ Zip: _____ County: _____

Telephone: _____ Email: _____

Date of birth: _____ Social Security No.: _____

Siblings (names/ages): _____

Education Information

High School: _____ Graduation date: _____

Rank in class: ____/____ Cumulative GPA: _____ SAT/ACT score: _____

College you plan to attend:

First choice: _____

Second Choice: _____

Course of Study/Major: _____

I already attend college. For the upcoming school year I will be a (check one):

First Year Second Year Third Year Fourth Year Other

Written Information

1. On a separate sheet of paper, please state your education and career goals and why you want to attend college. **Be specific.**
2. On a separate sheet of paper, please write an essay not to exceed 500 words on a topic of your own choice.

3. On a separate sheet of paper, list school related participation on extracurricular activities during high school. Be brief, and please include year(s) of participation for each activity.
4. On a separate sheet of paper, list community activities you have participated in during high school.
5. On a separate sheet of paper, list significant achievements or any special awards you have received.
6. On a separate sheet of paper, list summer and part-time employment held. Please include years of employment.
7. If desired, on a separate sheet of paper, please make additional comment that may be relevant for the committee evaluating this application.

Trust Document – Good Citizenship

The Last Will and Testament of Marguerite Lamb (controlling document of the Charles M. Bair Memorial Trust) requires:

In selecting recipients of the scholarship hereby created, consideration shall be given to achievement in high school, both academic and otherwise, good citizenship, moral character, apparent ability to benefit by a college education and financial need.

If there are any circumstances (including any criminal offenses, suspensions from school including any sports or other extracurricular activities, any other conduct that fails to meet the above conduct/moral requirement, please disclose here. (Failure to disclose is grounds for termination of a previously awarded scholarship.)

Recommendations

Please include with your application recommendations written by (at least two) professionals who can attest to your abilities and probability of success in college. Examples of such professionals would include teachers, employers (past and present), clergy, etc.

Transcripts

Your application must include an official copy of your academic transcript. The transcript should be sealed in an envelope with an official signature across the seal. The transcript should also include ACT and/or SAT scores, or an official copy of the score(s) shall be included. Transcript requirements are as follows:

- Applicants with no college experience must submit a high school or GED transcript.
- First year college students must submit high school and college transcripts.
- All other college students must submit college transcripts and proof of completing high school in Meagher or Wheatland County.

Financial Information (Applicant)

Savings account balance: \$ _____ Checking account balance: \$ _____

Wages earned in previous year: \$ _____

Is the applicant a U.S. citizen? Yes No

Is the applicant married? Yes No

Will the applicant receive additional scholarship assistance? If so, list award(s) and amount(s):

Applicant lives with (check all that apply):

Father

Stepfather

Guardian

Mother

Stepmother

Relative

Other (please explain): _____

Certification:

I (we) certify that all answers to the preceding questions are true and complete. I (we) understand that any false answers or deliberate omissions on this application may be grounds for rejection of this application and withdrawal of any award granted. I (we) authorize investigation of applicant's employment, schooling, and other activities and release those persons, organizations, or companies supplying information from all liability and responsibility for any damages I (we) may suffer as a result of this information, I (we) agree that I (we) will abide by all decisions made on behalf of the Charles M. Bair Memorial Trust Scholarship as they concern this scholarship application.

Applicant signature _____ Date: _____

Parent/Guardian signature* _____ Date: _____

**Signature of parent or guardian is required if student is a dependent for financial aid purposes.*

Financial Information (Parent or Guardian)

Father, male head of household, or guardian:

Name: _____ Age: _____

Employer: _____

Type of employment: _____

Adjusted gross income as it appears on previous year's U.S. Income Tax Return (last line page 1) or estimate if return has not been filed: \$ _____ *

Mother, female head of household, or guardian:

Name: _____ Age: _____

Employer: _____

Type of employment: _____

Adjusted gross income as it appears on previous year's U.S. Income Tax Return (last line page 1) or estimate if return has not been filed: \$ _____ *

Other income received in previous year:

SS Benefits _____
Veterans' benefits _____
Child support _____
Retirement _____
Unemployment _____

Other assets:

Savings Account _____
Stocks/Bonds _____
Farm/business** _____
Other land/buildings** _____
***less indebtedness*

Housing information:

Residence rented (month) _____
Resident owned (payment) _____
Original purchase price _____
Estimated present value _____
Mortgage balance _____

Family expenses previous year:

Medical/dental _____
Emergency expenses _____
Other _____

Other debts outstanding (do not include house mortgage, auto loans, or personal loans): _____

Total family members attending college: _____

Signature of parent/guardian _____

Signature of parent/guardian _____

Dated _____

**A copy of the first two pages of the previous year's (or last filed) U.S. Income Tax Return must be included with this application.*