

APPLY ONCE A YEAR
Bourbon County Educational Funds Application

YEAR: 20____20____

1. _____
2. _____
3. _____

(BOTH SEMESTER WILL BE MAILED TO THE SCHOOLS IN ONE CHECK "NO SECOND CHECK")

CHECK YEAR RECEIVING FUND: 1yr____2yr____3yr____4yr____

NAME _____
ADDRESS _____ City _____
STATE _____ ZIP CODE _____ SOCIAL SECURITY NUMBER _____
DATE OF BIRTH _____ PHONE# _____ EXTRA CONTACT
NUMBER# _____ E-MAIL ADDRESS _____

IF YOU ARE SELF-SUPPORTING , PLEASE FILL OUT YOUR PERSONAL FINANCIAL INFORMATION. IF YOU ARE CLAIMED BY YOUR PARENTS FOR INCOME TAX PURPOSES, PLEASE FILL OUT THEIR FINANCIAL INFORMATION.

FAMILY INCOME:

\$0 TO \$25,000____\$25,001 TO \$50,000____\$50,001 TO \$75,000____\$75,001 TO \$100,000____Over \$100,000____

Are you claimed as a dependent on another tax return? _____

Number of family members living at home _____ Number of family members under age 19 _____

Number of family members attending college _____ If brothers, sisters and/or parents are attending college also, If brothers, sisters and/or parents are attending college also, list those schools:

Father's Name & Occupation: _____

Mother's Name & Occupation: _____

!! IMPORTANT !!

Funds will be mailed to the school listed below, make sure address, and your student ID# are correct.

School attending _____ Student ID# _____

Address _____ State _____ Zip Code _____

Phone # _____ E-Mail _____

Attach the following documentations, and return completed application to the Courthouse:

(Inaccurate or incomplete information will cause applicant to be ineligible for funds.)

NEW APPLICANTS: BOYS & GIRLS

1. Must be a resident of Bourbon County, Kentucky
2. Show proof of admittance to the school, college or university
3. A copy of fall class registration (full-time 12 hours classes)
4. Copy of award letter is advisable
5. Copy of official high school transcript
6. Submit two letters of recommendation.

RETURNING APPLICANTS: BOYS & GIRLS

1. Submit last semester's grades. GPA must be 2.0 of higher
2. A copy of fall class registration showing full time student

Have you confirmed that receiving this Educational Fund will not prevent you from receiving other grants or scholarship money you are getting? _____ If **NO** please confirm before submitting your application.
 Are you or an immediate family member employed by PNC Bank? _____

High School graduated from? _____
 Year _____ GPA _____ Recent High School graduates: Composite ACT score _____

ENTER ANNUAL EDUCATIONAL EXPENSES FOR THE NEXT SCHOOL YEAR IN WHOLE DOLLARS:

EXPENSES:	TOTAL
TUITION	_____
ROOM	_____
MEALS	_____
BOOKS	_____
COMMUTING EXPENSES	_____
OTHER EXPENSE: (DESCRIBE & COST)	
_____	_____
_____	_____
_____	_____
_____	_____
TOTAL EXPENSES FOR SCHOOL YEAR	_____

STUDENT information (mark your past honors, programs, activities, etc.)

Governor's Scholar _____
 Kentucky Governor's Scholar Alumnus _____
 National Merit Finalist or semi-finalist _____
 Honors classes _____ AP Classes _____ IB Classes _____
 Kentucky Governor's School for the Arts Alumnus _____
 Rogers Scholars Program Alumnus _____
 Dependent of either an active serviceman or military Veteran _____
 Other organizations or activities _____

LIST ALL SCHOOL GRANTS AND LOANS YOU WILL RECEIVE THIS SCHOOL YEAR:

<u>Name of Source</u>	<u>Amount</u>
_____	_____
_____	_____
_____	_____
_____	_____
TOTAL	_____

AMERICAN LEGION SCHOLARSHIP:

NEW APPLICANTS: If you wish to be considered for the **AMERICAN LEGION SCHOLARSHIP**, complete the following:

If you are a descendant of a member of the American Legion, identify the post number, the member and your relationship to that person: _____

If you are a descendant of a member of the Auxiliary, identify the post number, the member and your relationship to that person: _____

If you are a descendant of a veteran, identify the member and your relationship to that person: _____

Signature of applicant _____ Date _____