Peoples Employee Scholarship
2020-2021 Academic Year

This scholarship was established to provide scholarships to children and dependents of Peoples Bank Employees. The scholarship is available to current seniors enrolled or accepted in an accredited college or university. Eligible applicants must have taken the SAT. This scholarship is renewable for three years provided the applicant maintains full-time enrollment status and a 2.5 GPA.

PERSONAL INFORMATION

Name:____________________________________________________________________________
Address:__________________________________________________________________________
City, State, Zip: ___________________________________________________________________
School: ___________________________________________________________________________
Telephone: _____________________________ Email:______________________________

FINANCIAL RESOURCES

Mother’s Name: ____________________________ Employer/Title___________________________
Father’s Name: ____________________________ Employer/Title___________________________
Telephone: _____________________________ Email:____________________________________

Where is your Primary Home (with whom do you live?): ____Both Parents in same home
____Mother’s home ____Father’s home ___Guardian ___Independent*

*For purposes of this application, to be considered independent you must be at least 18 years of age and have been living in your own residence, at your own expense, apart from your parents and/or guardian for at least twelve consecutive months.

List all scholarships for which you have applied and their status (i.e. pending, awarded $1000, denied):
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________

POST-SECONDARY SCHOOL DATA

Name of postsecondary school you plan to attend. (If unknown, please list in order of preference the schools to which you have applied.)
_____________________________________________________________________________
City:______________________State:_______
_____________________________________________________________________________
City:______________________State:_______
__4 yr. College or University __2 yr. Community or Junior College
__Vocational-Tech. School __Other, explain______________________________
Year in school next year: __1st__2nd__3rd__4th __
Major or course of study:___________________________________________________________
Expected college graduation date: Month_____Year_______
Degree sought: ___Bachelor ___Associate ___Certificate ___Other, explain__________________

_____________________________________________________________________________

_____________________________________________________________________________

_____________________________________________________________________________
APPLICATION CHECKLIST

The Student is responsible for submitting all materials to the Foundation by the posted due date. Incomplete applications will not be evaluated. This application becomes complete and valid only when all of the following materials have been received:

- Official transcript from your high school, verifying your GPA, class rank, and test scores.
- Copy of your SAT test scores.

Please follow all directions closely. Failure to provide any requested information will result in automatic disqualification.

Applicant’s Signature ____________________ Date ____________

Parent’s Signature (if applicant is a minor) ____________________ Date ____________

Submit your application and supporting materials to:

Marietta Community Foundation
100 Putnam Street
P.O. Box 77
Marietta, OH 45750

All parts of your application must be received by 5:00 p.m. on Friday, April 10th, 2020.