



## 2019 Citizens First WKU Scholarship Application

### DESCRIPTION

This scholarship is promoted and supported by Citizens First Bank. The scholarship is a funding mechanism to help ONE graduating senior from each of the following counties - Barren, Hart, Simpson and Warren - further their higher education by attending *Western Kentucky University*. Citizens First Bank feels strongly that by assisting area students in furthering their education, they may return to become a positive, productive member of our community.

### BASIC REQUIREMENTS

- Graduating Senior from **ANY** High School in Barren County enrolling **full-time for the 2019 fall semester** at WKU.
- Graduating Senior from **ANY** High School in Hart County enrolling **full-time for the 2019 fall semester** at WKU.
- Graduating Senior from **ANY** High School in Simpson County enrolling **full-time for the 2019 fall semester** at WKU.
- Graduating Senior from **ANY** High School in Warren County enrolling **full-time for the 2019 fall semester** at WKU.
- Graduating Homeschooled Senior residing in the Kentucky counties of Barren, Hart, Simpson and Warren enrolling **full-time for the 2019 fall semester** at WKU.
- Meet WKU's minimum grade point average requirements.
- Retain a record of good citizenship.
- Relatives of Citizens First Bank staff and board are not eligible for the award.

### SELECTION PROCESS

Applicants will be reviewed by the Scholarship Selection Committee. This committee will be responsible for selecting each recipient.

The recipient will be notified prior to the end of the school year.

The recipient will be asked to have a publicity photo taken for the recognition of the achievements of this student.

### DISBURSEMENT

One scholarship of **\$1,000** per county will be paid to the WKU Scholarship Office for the **2019 fall semester** as the Citizens First Bank WKU Scholarship.



# CITIZENS FIRST

## Citizens First SCHOLARSHIP APPLICATION

This Scholarship is for **\$1,000** and will be paid to the WKU Scholarship Office for the 2019 fall semester.

PLEASE TYPE OR PRINT IN INK

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_

SSN \_\_\_\_\_ PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ GENDER \_\_\_\_\_ MARITAL STATUS \_\_\_\_\_

MOTHER \_\_\_\_\_ OCCUPATION \_\_\_\_\_

FATHER \_\_\_\_\_ OCCUPATION \_\_\_\_\_

SIBLINGS (Name, Sex, Age and Occupation)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

COLLEGE PLANS:

IN WHAT FIELD DO YOU PLAN TO MAJOR? \_\_\_\_\_

IF UNDECIDED, LIST YOUR PRESENT PREFERENCES IN ORDER

I. \_\_\_\_\_ II. \_\_\_\_\_ III. \_\_\_\_\_

IF YOU HAVE SELECTED YOUR PROFESSION OR OCCUPATION, LIST BELOW

\_\_\_\_\_

\_\_\_\_\_

PLEASE SUBMIT TWO LETTERS OF RECOMMENDATION — EXTRACURRICULAR AND SCHOOL RELATED — **IN SEALED ENVELOPES WITH THE APPLICATION**. ONLY COMPLETE SCHOLARSHIP PACKETS WILL BE CONSIDERED.

**Return completed application to:**

Citizens First Bank  
Attn: Marketing  
1700 Scottsville Road  
Bowling Green, KY 42104

**APPLICATION DEADLINE IS FRIDAY, MARCH 1, 2019**

HIGH SCHOOL EDUCATION INFORMATION:

WHAT HIGH SCHOOL DO YOU ATTEND? \_\_\_\_\_

GRADUATION DATE \_\_\_\_\_ GPA \_\_\_\_\_

LIST YOUR MOST SIGNIFICANT HONORS AND AWARDS

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LIST YOUR EXTRACURRICULAR SCHOOL OR COMMUNITY ACTIVITIES

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LIST YOUR WORK EXPERIENCE—Including employer, job description, duration, earnings (begin with current position)

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EXPLAIN WHY RECEIVING THIS SCHOLARSHIP IS IMPORTANT TO YOU

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TO BE COMPLETED BY THE APPROPRIATE SCHOOL OFFICIAL AFTER APPLICANT HAS COMPLETED THE PREVIOUS SECTIONS.

1. Please include current transcript
2. Number in applicant's graduating class \_\_\_\_\_
3. Applicant's rank \_\_\_\_\_
4. GPA \_\_\_\_\_ Scale used \_\_\_\_\_
5. ACT SCORES: English \_\_\_\_\_ Math \_\_\_\_\_ Reading \_\_\_\_\_  
Science Reasoning \_\_\_\_\_ Composite \_\_\_\_\_
6. SAT SCORES: Verbal \_\_\_\_\_ Math \_\_\_\_\_
7. Recommendation or remarks for the Scholarship Awards Committee

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DATE \_\_\_\_\_ SIGNED \_\_\_\_\_

NAME \_\_\_\_\_

TITLE \_\_\_\_\_

8. Please list the school official(s) to be notified if scholarship is awarded.

\_\_\_\_\_

(Name)

(Title)

(Address)

### CONSENT FOR RELEASE OF STUDENT INFORMATION

I hereby give my permission to the Scholarship Awards Committee to publicly announce my special achievement. If such recognition involves reviewing my grade point average and scholastic record, this committee has my permission to use such information. I also authorize the Committee to share my application with any interested community club or organization for the purpose of awarding scholarships.

\_\_\_\_\_  
(Social Security Number)

\_\_\_\_\_  
(Student's Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Parent's Signature — If Student Is Under 18 Years Of Age)