

Grace W., Thomas B. and Elise Thompson Clark Scholarship Trust

*** APPLICATION FORM**

PLEASE NOTE: Scholarship recipients must reapply each year.
WARNING: Applications must be received no later than April 30.

Mail Completed Applications:

Clark Scholarship Trust
 Bank of America, N.A.
 CT2-547-05-19
 99 Founders Plaza
 East Hartford, CT 06108
 Attn: Anastasia Daukas

Fax

Clark Scholarship Trust
 (860) 244-4898
 Attn: Anastasia Daukas

Secure Email

anastasia.daukas@ustrust.com

Date Application Received

Leave
 Blank

Criteria & Minimum Scholastic Achievement Requirements for Scholarship Consideration

- (1) the student must be a resident of Halifax County, VA
 - (2) the student has a minimum cumulative GPA of (3.0 on a 4.0 scale) or (88 on a 100.0 scale) or greater; and
 - (3) the student is or will be enrolled in college as an undergraduate. (GRADUATE STUDENTS ARE NOT BEING CONSIDERED AT THIS TIME)
- PLEASE NOTE:** All applicant's will be notified the first week of June for fall enrollment of the same year.
PLEASE NOTE: The scholarship award amount will vary from year to year.

Documents Required for Scholarship Consideration

- 1 Official Transcript / Report Card (most recent issued) showing cumulative Grade Point Average (GPA) (MUST SUBMIT)
 The scholarship awards will first be awarded based upon merit. Students with an "A" Average (cumulative GPA of 3.86 or higher on a 4.0 scale) or (94 or higher on a 100.0 scale) will qualify for a scholarship. Proof of the student's cumulative GPA, as evidenced by a copy of the student's official transcript, report card or other official certification by the school is required and must be submitted with this application. (NO EXCEPTIONS)
- 2 Copy of most recent filed Personal Income Tax Return (MUST SUBMIT FOR NEEDS CONSIDERATION)
 Those students with a cumulative GPA less than (3.86, but not less than 3.0 on a 4.0 scale) or (less than 94, but not less than 88 on a 100.0 scale) must have their parent or the person who claims the student as a dependent on their personal income tax return provide and submit with this application (NO EXCEPTIONS) a copy of the first 2 pages of the Federal Personal Income Tax Return filed for consideration on a needs basis. Copies of personal income tax returns will be destroyed upon ranking for needs consideration.

Applicant Information

Name	Social Security #
Address	Telephone Number ()
City	State Zip Code
Email	

High School, Trade or Career School, College or University the applicant is currently attending.

Name of High School, College, University, Trade or Career School	Applicant is attending in <u>2018-2019</u> as (check one)		Reapplying from
	Freshman ()		a prior year?
	Sophomore ()		Yes ()
	Junior ()		No ()
City	State	Senior ()	

WARNING: All applicants must submit a report card showing cumulative GPA for consideration.

Name & Address and Contact Information of the Student Aid Office of the College, University, Trade or Career School to which the scholarship award should be sent.

Office	Start Date
College/Unv.	/
Address	Month Year
Address	
City	State Zip Code
Attn:	Telephone Number ()

I, the undersigned applicant, as of this day, certify that I am a permanent resident of Halifax County, VA

Applicant's Signature Date of Certification

WARNING: Incomplete and/or late scholarship applications will not be considered.

THIS SECTION TO BE COMPLETED BY THE SCHOLARSHIP COMMITTEE * APPLICANTS SHOULD NOT ENTER VALUES HERE

Cumulative Grade Point Average		Taxable Income / Total Exemptions Claimed	\$
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WARNING: Do not forget to attach the required documents.