

**J.BRYAN AND NORMA R. McCANN
CHARITABLE AND EDUCATIONAL TRUST**

Scholarship Application Form

Scholarships are available to graduating seniors and 1st, 2nd and 3rd year college students who are graduates of Fort Frye High School or any public or private high school in Washington County, Ohio

PLEASE NOTE: Your application must be complete and include the required attachments to be considered by the selection committee. Do not submit attachments separately. Review the following checklist before submitting your application.

If all criteria is not submitted, you must provide a written explanation.

All Applicants must provide:

1. Completed application form with attachments by April 25th
2. Proof of Income for parents and applicant (Examples: Income Tax Returns, W-2, or FAFSA Report with income information)
3. Current college students must provide most recent semester grades with cumulative GPA

New Applicants must also provide:

1. At least two Letters of Recommendation (non-family members)
2. ACT or SAT scores
3. Complete transcript of high school and college grades (if any)
4. Letter of acceptance from college/university or proof of current attendance

Check one:

I have submitted an application in previous years for this scholarship

This is my first application for this scholarship

APPLICATION DEADLINE: Application and attachments must be postmarked by April 25th and returned to:

**Century National Bank, Trust Department
P.O. Box 1515
Zanesville, Ohio 43702-1515**

**J. BRYAN AND NORMA R. McCANN CHARITABLE AND EDUCATIONAL TRUST
APPLICATION FOR EDUCATIONAL ASSISTANCE**

NOTE: This form must be fully completed and returned, along with all required information to Century National Bank, Trust Department, P.O. Box 1515, Zanesville, Ohio 43702-1515. Application must be postmarked by April 25th. Questions?? Contact 740-455-7324.

BIOGRAPHICAL INFORMATION (Please type or print in ink)

My full legal name is _____
last first middle Jr., etc.

Nickname _____ Sex: M _____ F _____

Permanent Home Address: _____ Phone# _____
number & street

_____ city or town state zip county

I have resided at that location for _____ years. I reside with my parents at said location: _____ yes _____ no.

Mailing address, if different from above: _____
number & street

_____ city or town state zip county

Birthdate: _____ Place of Birth: _____
month / day / year

My father's name is _____

My mother's name is _____

Those who are dependent upon my Father and Mother for support are:

Name	Relationship	Age
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I am now or will be a graduate of _____ High School. Date of Graduation _____.

I plan to attend or am now attending _____
Name of College, University or Training Program

Expected year of college graduation _____.

Address of school _____

Please attach evidence of acceptance to the school named above.

I shall be a (check one) freshman sophomore junior senior commencing _____
month / year

My total anticipated educational expenses for the academic year 20__ - 20__ - will be \$ _____

I plan to meet these expenses from the following sources:

\$ _____ family help \$ _____ loan from _____

\$ _____ student's earnings \$ _____ other scholarship grants & aids (list below)

ACADEMIC HONORS

Briefly describe any scholastic distinctions or honors you have won since the eighth grade:

EXTRACURRICULAR AND PERSONAL ACTIVITIES:

Please list your principle extracurricular, community, and family activities and hobbies in the order of their interest to you. Include specific events and/or major accomplishments such as musical instrument played, varsity letters earned, etc. Please check in the right column those activities you hope to pursue in college.

	Grade level or post-secondary (p.s.)					Approximate time spent		Position held, honors won, or varsity letters earned	Do you plan to participate in college?
	9	10	11	12	p.s.	hours per week	week per year		

WORK EXPERIENCE

Please list any job (including summer employment) you have held during the past three years.

Specific Nature of Work	Employer	Approximate Dates of employment	Approximate no. of hours spent per week

Share with us any information you would like the scholarship committee to consider (family situations, career goals, personal challenges, etc.): _____

STATEMENT OF APPLICANT (this must be signed)

I hereby certify that, to the best of my knowledge, the above information is complete and accurate. I authorize my secondary school to furnish academic and personal information requested herein. I will use all money which I receive from the Educational Trust for the purpose of completing my education and for no other purpose whatsoever.

Signature of Applicant _____ Date _____