

Jackson-Newcomb Scholarship Fund

Application for Financial Assistance for 2018-2019 School Year

Deadline: March 31, 2018

The 2018-2019 Scholarship Application must be completed and postmarked with the following attachments by March 31, 2018 in order to be considered for the upcoming school year. If you do not have all the requirements attached, your application will not be reviewed. No courtesy calls will be made in the instance of incomplete applications. Please complete all fields on this application, even if you are reapplying for the scholarship. Please feel free to send your application by certified mail to confirm it is received by the due date, or you may call to confirm. If you drop your application off in person you may ask for a receipt.

Your application must include:

- **Page 1 of your parents 1040 for the 2017 tax year**
This must be from the parent(s) who claimed the student. If parents do not file a 1040, a copy of the summary page from the student's completed FAFSA (Free Application for Federal Student Aid Form) must be attached. This form must include income information.
- **A copy of your fall/winter 2017 grades**
We do not require an official transcript, but it is imperative that your full name and your cumulative G.P.A. are included on the grade report submitted. A separate copy of your grades is required for this application. If you have submitted your grades for another purpose do not assume they will be included for this application.
- **Three (3) reference letters**
These may be mailed separately to the Trust Department, as long as they are received by March 31st. This is not required if you are a current recipient of the Jackson-Newcomb Scholarship.

Please submit to:

United Bank
Attn: Scholarships
514 Market Street
Parkersburg, WV 26101

Or email to:
scholarships@bankwithunited.com
Please include the name of the scholarship
as your subject line

Criteria | Jackson-Newcomb Scholarship Fund

Under the provisions of this trust, the following criteria has been established.

1. The Jackson-Newcomb Scholarship is to be awarded to worthy students who are keenly interested in, and capable of taking advantage of, any opportunity for a college education. The order of preference given to each applicant who meets all requirements for eligibility is as follows:
 - Boone County, West Virginia residents who are attending any participating educational institution.
 - West Virginia residents who are attending any participating educational institution.
 - United States residents who are attending any participating educational institution.
2. Additional criteria upon which student selection is based:
 - Prior academic performance.
 - Performance on tests designed to measure ability and aptitude for college work.
 - Recommendations from instructors.
 - Financial need.
 - Written items submitted to, or from a personal interview with, the committee, as to the motivation, character, ability and potential of the student.
3. All applications, including any requested attachments, must be postmarked by deadline stated on the application to be considered for a scholarship for the fall and spring semesters.
4. Applications must include the full name and cumulative GPA from the last semester of school completed.
5. Applications need to report composite scores for the ACT and/or SAT test.
6. Included with the scholarship application, Scholarship Selection Committee requests counselors to provide any additional special information/comments regarding any applicant (i.e. mother or father died, severe illness in family, etc.) to help the Committee identify special needs of students.
7. All recipients must maintain at least a 2.0 or "C" GPA and full-time enrollment in order to be eligible.
8. Scholarships awarded may be continued for consecutive years for a maximum of a four-year degree. However, to receive the renewal scholarship, the student must furnish an updated application, and a report of their grades provided by the school, prior to the deadline of each year. If the updated application and grades are not received by that date, a scholarship may not be awarded until the following year when a new application would be submitted. A current year tax form (1040) of the parent(s) that the applicant resides with or the parent whom claims the applicant is required.

9. Students will not be contacted to request proof of grades or an updated application for renewal scholarships. It is the responsibility of each student to provide accurate, timely grade reports to the Scholarship Selection Committee immediately after each semester/quarter.
10. Scholarship awards may vary from year to year depending on availability of funds. If special circumstances call for a specific amount, a letter of explanation from the student is requested.
11. Once a Scholarship is awarded to a student for a particular college, changing colleges may change the amount of the scholarship award. If denied, the student would have to re-apply prior to the following March.
12. Scholarship awards will be mailed in July and November for one-half of the awarded annual amount. Checks will be payable to the student AND the college or university. Checks will be mailed directly to the student and they will need to contact the financial aid officer at the school to finalize the award.

Having read and understanding the requirements, I accept the terms and conditions:

Signature

Date

United Bank and its Wealth Management Department were not involved with the development of the terms, conditions, and qualifications for this scholarship. Each scholarship fund is a legal entity separate and apart from United. The terms, conditions, and qualifications for each scholarship fund were crafted by the creator(s) of that scholarship fund. United Bank and its Wealth Management Department Group serve solely in a capacity where it administers each scholarship fund in accordance to the terms, conditions, and qualifications of the particular scholarship fund.

Contact Information

Full Name _____

Birthdate _____

Street Address _____

City, State, Zip _____

County _____

Telephone (home) _____ **(mobile)** _____

Parent Phone _____

Applicant Email _____

Parent Email _____

Are you related to anyone working at United Bank? Yes ___ No ___

Name _____ **Relationship** _____

Name _____ **Relationship** _____

Name _____ **Relationship** _____

Prior Awards

Have you previously been awarded this scholarship? Yes ___ No ___

If yes, please complete the following, listing scholarship year and amount received.

Scholarship Year				
Award Amount				

Education History

	Name of Institution	Address	Dates Attended	GPA
High School Attended			From To	
College Attended			From To	
Other			From To	

ACT Scores: Comp _____

SAT Scores: Comp _____

College Information

First choice of college or university _____

City and State _____

Second choice college or university _____

City and State _____

Major or field of study _____

Expected Graduation Date: _____

Classification for the upcoming academic year: Freshman ___ Sophomore ___ Junior ___ Senior ___

Will you be a full-time student during the school year of 2018-2019? Yes ___ No ___

If no, please explain:

Based on your current (or researched) expenses, please list your anticipated expenses for the upcoming academic year:

Books _____ **Room** _____

Tuition _____ **Board** _____

Total anticipated expenses _____

Please attach a letter to explain any special circumstances.

Employment (beginning with most recent)

Employer	Address	Position	Dates	Wage
			From To	
			From To	
			From To	

Have you ever been terminated or asked to resign from any position? Yes ___ No ___

If yes, please explain:

Please list any organizations to which you belong (i.e. civic or academic clubs), including volunteerism:

Name of Organization	Type of Involvement	Years Involved

Name of Organization	Type of Involvement	Years Involved

Please provide a breakdown of your current debt:

Education _____ Vehicle _____ Credit _____
 Mortgage _____ Medical _____ Other _____

Marital Status: Single ___ Married ___ Separated ___ Divorced ___ Widowed ___

Please list names and relationship of any dependents who rely upon your income:

Name	Relationship

Name	Relationship

I hereby affirm that the foregoing answers and statements are true and correct and that I have not withheld any information that could, if disclosed, affect this application unfavorably.

Applicant's Signature

Date