

**THE MICKEY AND ROSS KELDER SCHOLARSHIP TRUST
APPLICATION**

**For full time students who are pursuing studies in foreign languages within the
State of Arkansas
(See Kelder Booklet for criteria for this scholarship)**

Student Information

Name: _____

_____ - _____ - _____ _____ / _____ / _____

Social Security Number Age Date of Birth

Permanent Address: _____

City: _____ State: _____ Zip: _____

State & County of Legal Residence: _____

_____ _____ _____

Home Phone #

Work Phone #

School Phone#

Year Currently in School: _____

C=College, V=Vocational, H=High School, & 1, 2, 3, or 4 for year. GS for Graduate Student.
(Ex. C1 is a College Freshman; V1 is for first-year Vocational-Technical, etc.)

College Expected to Attend or Currently Enrolled In: _____

School Address: _____

City: _____ State: _____ Zip: _____

Major: _____

Expected Date of Graduation: _____

Estimated cost per semester: Tuition & Fees _____ Room & Board _____

Books _____ Total Est. _____

_____ _____ _____ _____

High School Grade Point ACT Score SAT Composite Score College GPA
Average (From Transcript) (Highest) (Highest)

***Enclose a Current Official High School Transcript & ACT/SAT Scores or Current
Official College Transcript. No photocopies will be accepted.**

***Enclose Proof of Admission to College, if available**

Will you be employed while attending college? _____

Employer: _____

Phone#: _____

Number of hours worked per week: _____

Extra Curricular Achievements

Spouse Information

Are you married? (Y/N) _____ Date of Marriage: _____

Spouse's Name: _____

Is your spouse a full-time student? _____

(Provide proof of full time status from school)

Scholarship Information

Have you received or are you going to receive any other scholarships? yes ____ no ____
Please list with \$ amounts

_____	_____	\$ _____
Title of Scholarship	Source of Scholarship	Amount/year

_____	_____	\$ _____
Title of Scholarship	Source of Scholarship	Amount/year

_____	_____	\$ _____
Title of Scholarship	Source of Scholarship	Amount/year

References

Reference letters from acquaintances within last two years: * **Minimum 2 required**

Examples:

High School Counselor or Teacher, College Advisor or Vocational-Technical School Counselor

Pastor/Minister/Rabbi

Employer (indicate whether past or present)

Other Non-Family Member

***Also include a letter from yourself stating your need for this scholarship.**

Financial Information

Please attach a copy of the most recent Federal Income Tax Return (Form 1040) for yourself, if you are independent. (A student is only independent if age 23, married, a veteran, a ward of the court, or has a child). **If you are not independent, attach a copy of the Form 1040 from the person who claims you as a dependent for federal income tax purposes.**

In addition, mail or attach a completed financial statement of yourself or any person who claims you as a dependent for federal income tax purposes. Attached as Attachment 1 is a form of financial statement which is acceptable to the Trustee.

How many in household including yourself? _____

Family Income: _____

Personal Income: _____

The deadline is April 12th. The Trustee must receive the required information by the close of their business day at the main bank location (502 S. Hickory, Mountain Home, Arkansas). If the deadline falls on a weekend or bank holiday, then the deadline will be on the next business day.

Please send completed application, current official transcript, proof of admission, reference letters, your letter, copy of most current tax return (1040) and certified financial statement to the following address:

Kelder Scholarship – Laura C. Huett
First National Bank & Trust Company
P.O. Box 1928
Mountain Home, AR 72654-1928

The above address is the main bank's mailing address.

