

**THE FREDERICK H. & KATHLEEN M.  
HORNLEIN SCHOLARSHIP  
RE-APPLICATION**

**Use this form only if you are currently receiving the Hornlein Scholarship**  
**(See the Hornlein Booklet for additional information on this scholarship)**

**Student Information**

Name: \_\_\_\_\_ (Maiden Name, if Married)

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_  
Social Security Number                      Age                      Date of Birth

Permanent Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

State & County of Legal Residence: \_\_\_\_\_

\_\_\_\_\_  
Home Phone #                      Work Phone #                      School Phone#

\_\_\_\_\_  
College GPA

**\*Enclose a Current Official College Transcript. No photocopies will be accepted.**

Year Currently in School \_\_\_\_\_

C=College, V=Vocational & 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.)

Will you graduate next school year? \_\_\_\_\_

Expected Date of Graduation: \_\_\_\_\_

Major: \_\_\_\_\_

Are you planning to change colleges? \_\_\_\_\_

Information on college that you are changing to:

\_\_\_\_\_  
School Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Estimated cost per semester: Tuition & Fees \_\_\_\_\_ Room & Board \_\_\_\_\_

Books \_\_\_\_\_ Total Est. \_\_\_\_\_

Will you be employed while attending college? \_\_\_\_\_

Employer: \_\_\_\_\_

Phone#: \_\_\_\_\_

Number of hours worked per week: \_\_\_\_\_

## Scholarship Information

Have you received or are you going to receive any other scholarships? yes\_\_\_\_ no\_\_\_\_  
Please list with \$ amounts. (Do not include loans or work study information).

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

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

**\*Enclose 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 March 31<sup>st</sup>. 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, your letter, copy of most current tax return (1040), and a certified financial statement to the following address:**

Hornlein 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.

