INSTRUCTIONS

Lois E. Heins Trust

One - \$2,500.00 Award to a Graduating Male at PTHS One - \$2,500.00 Award to a Graduating Female at PTHS

Bank of Pontiac-Trust Dept. Pontiac, Illinois

Purpose:

The Bank of Pontiac Trust Department administrates this scholarship fund. The Bank Selection Committee solicits applications from a graduating male student and a graduating female student at Pontiac Township High School who will go on to further their studies in any curriculum.

- 1. Applications are to be distributed and returned through the Guidance Department. Applicants are asked to submit completed packets to the Guidance Office on or before **April 2, 2021.** Applicants may submit photocopies of transcripts, letters of recommendation, and similar applications, provided the copies are disclosing the information requested. However, each application must be certified and acknowledged with original signatures. Please include the following information:
 - A. Certified Transcript C. Application
 - B. ACT Scores D. Letter from Administrator or Teacher
- 2. Applicant selection will be based on:
 - -Character-financial need

-Scholastic achievement -Recommendation of -Success in field of study Administrator or Teacher

-Career plans -Community Involvement

3. There are no restrictions on the applicant's selection of an institution for continuing education.

- College - Vocational School

- Technical School - Other advanced study

- The applicant's program of study must be uninterrupted and continuous upon graduating from high school.
- 5. Limit of one scholarship per year for any one recipient.
- 6. The scholarship check will be issued to the student and institution of their choice.
- 7. The selection committee will be appointed annually by the Bank of Pontiac
- 8. The selection of the recipients will be announced during the High School Honors Night.

SCHOLARSHIP APPLICATION

1 Award of \$2,500.00 to a Graduating Male at PTHS 1 Award of \$2,500.00 to a Graduating Female at PTHS

rship Name-Lois E. HeinsTrust				
Applicant	Date			
Address	Phone			
City, State, Zip				
High School Name	Graduation Year			
Place and date of birth				
Please include the following items in application packet: (Use back of application if more space needed)				
A. Certified Transcript B. ACT Scores C. Class Rank (# out of #) and GPA with school scale.	D. ApplicationE. Letter from Administrator or Teacher			
List your participation in school activities, and offices held.				
List your participation in community acti	vities, and offices held.			

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Institution	Field of	Study
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Are you applying	for any other scholarships? Y	ES or NO
If yes, please list	below and indicate the amount.	Mark those scholarships receive
Received Sch	<u>olarship</u>	<u>Amount</u>
Name of Parent o	or Guardian	
		of Brothers and Sisters
		ge
	-	

Parents' Adjusted Gross Income from 2020 Federal Income Tax Form \$					
Number of de	pendents on this inco	ome:			
Have you or	will you complete the I	Free Application for Federal S	Student Aid? YES / NO		
	es, please indicate your EFC from your Student Aid Report				
Identify the fo	entify the following continuing education costs for one year:				
Tuition \$		and Room and Board \$			
		l available from parents, guar If the financial aid is			
Do you have	part-time or summer e	employment? YE			
Do you have		employment? YE			
Do you have If yes, please Employer	part-time or summer e list your employer, po	employment? YE osition and earnings. <u>Position</u>	S or NO <u>Earnings</u>		
Do you have If yes, please Employer	part-time or summer e list your employer, po sonal references, non	employment? YE osition and earnings.	S or NO <u>Earnings</u>		

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Parent or Guardian's Signature

14.	Please attach a statement from a school administrator or a teacher recommending you for this scholarship based on achievement and need.				
15.	The scholarship check will be payable to the recipient and the institution.				
16.	I certify that I have completed this application and all statem the best of my knowledge.	ents are true and correct to			
	Applicant's Signature	Applicant's Social Security			