



**APPLICATION  
MARIETTA COLLEGE SCHOLARSHIP**

**DEADLINE: ALL APPLICATIONS ALONG WITH ALL REQUIRED DOCUMENTS MUST BE RECEIVED BY December 20, 2018**

FULL NAME \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_ PARENT/GUARDIAN: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

HIGH SCHOOL ATTENDED: \_\_\_\_\_ GRADUATION DATE: \_\_\_\_\_

GPA/SCALE: \_\_\_\_\_  
(PLEASE PROVIDE TRANSCRIPTS)

ACT/SAT SCORES: \_\_\_\_\_  
(PLEASE PROVIDE VERIFICATION)

HAVE YOU BEEN ACCEPTED TO MARIETTA COLLEGE? \_\_\_\_ YES \_\_\_\_ NO

ACTIVITIES IN WHICH YOU HAVE BEEN INVOLVED WHILE ATTENDING HIGH SCHOOL:

EXTRA CURRICULAR: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ATHLETIC: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

CIVIC:

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PLEASE LIST EMPLOYMENT HISTORY, IF ANY:

	<u>DATE</u>	<u>NAME &amp; ADDRESS OF EMPLOYER</u>	<u>POSITION</u>
FROM:	_____	_____	
	_____		
TO:	_____	_____	
	_____		
FROM:	_____	_____	
	_____		
TO:	_____	_____	
	_____		
FROM:	_____	_____	
	_____		
TO:	_____	_____	
	_____		

SETTLERS BANK SCHOLARSHIP  
PAGE TWO

NAMES, TITLES AND ADDRESSES OF INDIVIDUALS YOU HAVE ASKED TO PROVIDE  
REFERENCE LETTERS EVIDENCING YOUR WORTHINESS OF THIS SCHOLARSHIP. PLEASE  
PROVIDE AT LEAST THREE REFERENCES.

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EXPLAIN ANY SPECIAL CIRCUMSTANCE OR NEED THAT YOU HAVE WHICH YOU BELIEVE WILL AFFECT THE BANK'S CONSIDERATION OF YOUR APPLICATION (THESE APPLICATIONS ARE HELD IN STRICT CONFIDENCE BY THE COMMITTEE):

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PLEASE ATTACH A COVER LETTER EXPLAINING YOUR PROFESSIONAL OBJECTIVES AND INCLUDE WHY YOU FEEL YOU ARE DESERVING OF THIS SCHOLARSHIP.

SIGNATURE \_\_\_\_\_  
\_\_\_\_\_

DATE:

MAIL APPLICATION ALONG WITH COVER LETTER TO:

SETTLERS BANK  
SCHOLARSHIP COMMITTEE  
P.O. BOX 755  
MARIETTA, OH 45750

*NOTE: TRANSCRIPTS AND REFERENCE LETTERS SHOULD BE SENT TO THE SAME ADDRESS*