

CLETCHER-WESSALE SCHOLARSHIP APPLICATION

| Applicant Name: | | SS #: |
|--|-----------------------------|---|
| Complete address: | | Phone: |
| Date of Birth: | ACT/SAT Composite: _ | High School Class Rank: |
| High School GPA: | College GPA: | College years completed: |
| College/University to be attended/or | attending: | al transcript and proof of college enrollment) |
| (***Current year high school | seniors must provide offici | al transcript and proof of college enrollment) |
| College Major: | Minor: | |
| | pheants must menude curren | t transcript and proof of continuing enronment) |
| Projected Annual College Cost: Tuit | | lition: |
| | B | oom/Board: ooks/Fees: |
| Professional Experience: | | |
| | | |
| Professional Memberships: | | |
| Extracurricular activities, high school and/or college: | | |
| Awards and achievements during high school or college: | | |
| Reason you are pursuing this career: | | |
| To the best of my knowledge, all the information on this page is accurate and correct. | | |
| Signature: | | Date: |

<u>Please save documents as .pdf files and attach to email the completed and signed application, transcript and</u> <u>enrollment proof by April 12, 2024</u> to <u>Dave.Brandon@hickorypointbank.com</u>. Questions, call 217-872-3915.