THE JOSEPH R. EVERY SCHOLARSHIP FUND

Completed application and all supporting documentation must be returned to:

- Your Guidance Office by Monday, April 8, 2024 or
- A C&N office by Friday, April 12, 2024

Please type or print in ink.

PERSONAL DATA

NAME:			
ADDRESS:			
CITY:	STATE:	 	ZIP:
TELEPHONE: Home: ()	(Cell: ()
DATE OF BIRTH:	EMAIL ADDRESS: _		
FATHER'S NAME:	(Cell: ()
OCCUPATION:	EMPLO	OYER: _	
MOTHER'S NAME:	(Cell: ()
OCCUPATION:	EMPLO	OYER: _	
PARENT(S) EMAIL ADDRESS:			
NUMBER OF BROTHERS AND	SISTERS:		
Are any of them attending colleg	e? If ye	s how m	any?
If so, indicate where they are atte	ending:		
If someone other than your pare	nts financially suppor	ts you, pl	ease indicate:
NAME:	RELATIONSH	IIP:	
ADDRESS:			
CITY:	STATE:		ZIP:
OCCUPATION:	EMPLO	YER:	
List any unusual expenses your	parent or guardian ha	as:	

	NAME:
COLLEGE AND CAREER GOALS	
Name of the college you plan to attend	d:
What major will you pursue?	
What degree do you expect to receive	e?
	our degree?
COLLEGE COSTS FOR YOUR FRES	SHMAN YEAR (Do not include personal
Tuition and Fees:	
Room and Board:	
Books and Supplies:	
PERSONAL CHARACTERISTICS	
Do you smoke tobacco?	
Do you use illegal drugs?	
Do you use alcoholic beverages?	
FINANCIAL INFORMATION	
	it is required that you attach a copy of the ederal Student Aid (FAFSA) form which sets forth
EDUCATIONAL INFORMATION	
GPA	
Please attach a copy of your official h	igh school transcript.

ESSAY

Please prepare a 200-250 word essay about yourself, your goals and objectives in life. The essay should be typewritten and double-spaced on a separate sheet of paper.

REFERENCES

Please attach to this application two letters of reference from organization leaders, business people or teachers who are not related to you.

Please attach copies of this page if additional space is needed.

EMPLOYMENT (During high school years only)

Employer	Type of Work	Per Week	From:	To:
Example: John Doe Restaurant	Wait staff	10 	07/01/09	to 02/15/10
COMMUNITY & VOLUNTEE Organization Name	R ACTIVITIES (Du	uring high sch		only) f Involvement
<u> </u>	,	Per Week	Fron	n: To:
Example: Big Brothers/Big Sisters	Mentoring			09 to present
SCHOOL ACTIVITIES (Duri			Wooko	Dorticipation
Organization/Sport	Type of Activity	No. Hours Per Week	Weeks Per Year	Participation Years:
Example: Student Government	leadership	4 — — — — — — — — — — — — — — — — — — —	36	Fr, So, Jr, Sr

Date	Applicant's Signature
Name of High School	Print Name

ONLY COMPLETED APPLICATIONS RECEIVED BY THE DEADLINE AND ACCOMPANIED BY ALL REQUIRED SUPPORTING DOCUMENTATION WILL BE CONSIDERED FOR THIS SCHOLARSHIP.

C&N Wealth Management 90-92 Main Street, Wellsboro, PA 16901 1-800-487-8784

A complete	e application package must include:
	Signed and dated Application
	FAFSA with Student Aid Index
	Official Transcript
	Essay
	TWO Letters of Reference
	To type your application or for additional copies please visit:
	www.cnbankpa.com/Every