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|  | The Olive A. Stokes Scholarship Trust |

The Olive A. Stokes Scholarship Trust was established by Olive A. Stokes to provide financial assistance for qualified post-secondary school students. Qualified students receive financial assistance in the form of scholarship grants. Students are considered based on the following guidelines:

* Must be residents of Nash or Edgecombe Counties, North Carolina, and citizens of the United States of America.
* Must demonstrate need, qualities of leadership, good citizenship, force of character and community spirit, and scholarship (C+ average or better).
* Students are not restricted by race, color, creed or sex.
* Students previously receiving scholarship grants from the Fund may reapply, subject to continued compliance with the above guidelines.

Students wishing to apply for scholarship grants from the fund must fully complete the attached Application and return it along with all required attachments, via email by June 22, 2020 to Althea Nelson at anelson@comerica.com and Dave Benedetto at dabenedetto@comerica.com.

PLEASE NOTE THAT INCOMPLETE APPLICATOINS WITH MISSING ATTACHMENTS OR INCOMPLETE ANSWERS MAY NOT BE CONSIDERED.

|  |  |
| --- | --- |
|  | Instructions for completing the application  |

1. Please answer all questions by typing or printing clearly.
2. Supply accurate family income, tuition, and financial aid information (these figures may be verified).
3. If you are currently a high school senior, you MUST attach the following information:
* Certified high school transcript\*
* Certified SAT or ACT scores (certified high school transcripts

 reflecting SAT or ACT scores acceptable)

4. If you are currently in college, you MUST attach the following

 information.

* Certified high school transcript not previously furnished
* Certified SAT or ACT scores not previously furnished
* Up-to-date certified transcripts from all colleges for completed

work not previously furnished\*

5. Please do not print or submit this application using double sided format.

6. If you filed a federal income tax return last year, you must attach a copy to this application. If you are a dependent of your parents and/or receive financial support from them, you must attach a copy of their federal income tax return.

\* ONLY SUBMIT YOUR *FINAL* TRANSCRIPT, WITH NO GRADES PENDING. IF YOU ARE UNABLE TO GET THE FINAL TRANSCRIPT BEFORE THE DEADLINE, PLEASE NOTE ON YOUR APPLICATION WHEN WE WILL RECEIVE YOUR FINAL TRANSCRIPT.

Applications for the upcoming academic year must be received by Comerica Bank & Trust, N.A. by June 22, 2020. Applications with incomplete answers or missing attachments may not be considered.

|  |  |
| --- | --- |
|  | Application for Scholarship Grant from Olive A. Stokes Scholarship Trust |

## Please type or print clearly

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Full Name: |  |  |  | Date: |   |
|  | Last | First | M.I. |  |  |

Residence

|  |  |  |
| --- | --- | --- |
| Address: |  |  |
|  | Street Address (Please provide the mailing address in addition if different than residence address) | Apartment/Unit # |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  | City State County  |  | ZIP Code |

|  |  |  |  |
| --- | --- | --- | --- |
| Phone: |  | Email |   |

|  |
| --- |
|  |

Date of birth:

 YES NO

Are you a citizen of the United States? [ ]  [ ]

Previous Recipient from Stokes Fund? [ ]  [ ]

## High School Information

Please list the High School(s) you have attended and the graduation dates (if you have not graduated yet, please list the expected graduation date)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| School Name: |  |  |  | Graduation Date: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| School Name: |  |  |  | Graduation Date: |  |

YES NO

Have you been accepted to post-secondary school? [ ]  [ ]

**Where currently enrolled/Accepted:**

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  | Name of School City State  |  |  |

Status**:** [ ]  Freshman [ ]  Sophomore [ ]  Junior [ ]  Senior

 YES NO

Student living on campus?[ ]  [ ]

## Please list other Universities, Colleges or Technical Schools attended

**School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| From: |  | To: |  | Did you graduate? | YES[ ]  | NO[ ]  | Degree: |  |

**School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| From: |   | To: |  | Did you graduate? | YES[ ]  | NO[ ]  | Degree: |  |

## Vocational Aim

|  |  |
| --- | --- |
|  |  |
|  |  |

|  |  |
| --- | --- |
|  |  |

## Academic Expenses and Financial Aid Information

Please list your expenses (anticipated) for first and second semester.

|  |  |  |
| --- | --- | --- |
|  | 1St Semester | 2nd Semester |
| Total Academic Hours Expected (Minimum 12 hours per semester) |  |  |
| Tuition & Fees | $ | $ |
| Books | $ | $ |
| Room and Board | $ | $ |
| Total Expenses | $ | $ |

|  |  |
| --- | --- |
| YES [ ]  | NO[ ]  |

 Have you applied for Financial Aid (FAFSA)?

|  |  |  |
| --- | --- | --- |
|   | 1St Semester | 2nd Semester  |
| Pell Grant  | $ | $ |
| North Carolina Need Based Scholarship | $ | $ |
| Other Grants: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ | $ |
| Other Private Scholarships: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  | $ | $ |
| Direct Loan(s) | $ | $ |
| Other Loans:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ | $ |
| Total Financial Aid | $ | $ |
| Total Expenses Less Financial Aid | $ | $ |

## Applicant & Family Information

|  |
| --- |
| **Applicant Occupation:** Gross Annual Income: $ |

Marital Status**:** [ ] Married [ ]  Single [ ]  Separated/Divorced

|  |
| --- |
| $ |

|  |
| --- |
|  |

 If married, spouse’s occupation Spouses annual income:

|  |
| --- |
|  |

|  |
| --- |
|  |

 Number of dependent children: Ages:

|  |
| --- |
|  |

 Number of dependent children in college:

**Parents**

Marital Status:[ ] Married [ ]  Single [ ]  Separated/Divorced

|  |
| --- |
| Father’s occupation: Gross annual income: $ |

|  |
| --- |
| Mother’s occupation: Gross annual income: $ |

|  |
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 Number of dependent children: Ages:

|  |
| --- |
|  |

 Number of dependent children in college:

**Other**

|  |
| --- |
|  |

Other Financial Contributors:

|  |
| --- |
| $ |

Amount:

|  |
| --- |
|  |

Other Income and Resources:

|  |
| --- |
| $ |

Amount:

|  |
| --- |
| $ |

TOTAL INCOME FROM ALL SOURCES:

Please state any unusual financial conditions:

|  |  |
| --- | --- |
|  |  |

|  |  |
| --- | --- |
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|  |  |

## School and Community Information

 YES NO

Have you ever been convicted of a crime more serious than a minor traffic violation? [ ]  [ ]

|  |
| --- |
|  |

If yes, please explain:

|  |
| --- |
|  |

School activities and achievements:

|  |  |
| --- | --- |
|  |  |

|  |  |
| --- | --- |
|  |  |

|  |
| --- |
|  |

Church and Community activities and achievements:

|  |  |
| --- | --- |
|  |  |

|  |  |
| --- | --- |
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|  |

State your ambitions and goals after graduation:

|  |  |
| --- | --- |
|  |  |

|  |  |
| --- | --- |
|  |  |

List three references excluding family members and school or college officials:

|  |
| --- |
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Name: Phone #

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| --- |
|  |

Name: Phone #

|  |
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|  |

Name: Phone #

I hereby certify that the above-listed information is true and correct to the best of my knowledge.

|  |  |  |  |
| --- | --- | --- | --- |
| Signature: |  | Date: |  |