

JOHN D. BARE MEMORIAL SCHOLARSHIP
APPLICATION

****Employees of Fulton Bank, NA, or any affiliates or subsidiaries of Fulton Bank, NA, and their immediate family members (spouse and children) are not eligible recipients of any funds distributed from the John D. Bare Memorial Scholarship Fund. Any application submitted by a Fulton Bank, NA, employee or family member will not be considered for the above scholarship.****

Applicant's Name _____ Date of Birth _____

Home Address _____

City _____ State _____ Zip Code _____

Telephone Number _____ Email address _____

School Currently Attending _____ Year of Graduation _____

Father's Name _____

Address _____

City _____ State _____ Zip Code _____

Name of Employer _____

Total Annual Household Income _____

Mother's Name _____

Address _____

City _____ State _____ Zip Code _____

Name of Employer _____

Total Annual Household Income _____

List information about your educational and career aspirations, extra-curricular activities and special scholastic achievements in school and/or the community:

List schools to which applications for admission have been made:

List all institutions to which applications for scholarship aid has been made (indicate amounts awarded and dates awarded, if applicable):

List all institutions including governmental sources to which application for interest-free educational loans have been made (indicate amounts awarded and dates awarded, if applicable):

Please attach the following to this application:

Official high school transcript of current grades

SAT or other college-bound test results

Two letters of recommendation, on school letterhead, from members of the faculty and/or administration

Copy of parents' most recent federal income tax return (Social Security numbers blacked out)

The Scholarship Awarding Committee will consider the following criteria:

Scholastic record of the applicant

Character of the applicant (as determined from the letters of recommendation)

Achievements and goals of the applicant

Financial situation of the applicant/family

SIGNATURE:

I, _____, do hereby acknowledge the above information to be true and correct to the best of my knowledge and belief.

Student Signature:

Date _____

Principal, Guidance Counselor or Teacher Signature:

Date _____

Please return completed application along with all required documentation by March 29, 2024, to:

Fulton Bank, NA
Erin J. Miller
30 South George Street
York, PA 17401

Or

ermiller@fultonbank.com

Other Information about the John D. Bare Memorial Scholarship:

- **This is a scholarship to be applied toward tuition costs for enrollment in an accredited college, university, or two-year trade school. Any amounts awarded will be paid directly to the educational institution.**
- **This scholarship will continue to be awarded to the chosen student in subsequent years, provided that student maintains a 2.00 G.P.A. and satisfactorily completes a reapplication.**
- **The scholarship amount may vary from year to year.**