Robert J. and Helen F. Johnston Memorial Scholarship Fund

First Financial Bank NA, Trust & Asset Management ~ Pontiac

INSTRUCTIONS

Multiple \$1,000 Awards

Purpose:

First Financial Bank NA serves as Trustee of the *Robert J. and Helen F. Johnston Scholarship Fund*. The Trustee is directed to solicit applications for scholarships from graduating Pontiac Township High School seniors.

- Completed application packets are to be delivered to the Pontiac Township High School Guidance
 Office on or before Monday, March 2, 2020 and must contain the following.
 - Completed Application with original signatures.
 - Certified Transcript ~ identifying ACT scores, GPA and Class Rank (# out of #).
 - Letter of Recommendation from Teacher and Administrator, copies accepted.
 - Scholarship Instruction sheet.
- 2. Applicant selection will be based on:
 - Character
 - Scholastic achievement
 - Professional promise
 - Career Plans
 - Community involvement
 - Financial Need
 - Letter Recommendation of Teacher and Administrator
 - Ranked in upper 25% of class
- 3. There are no restrictions on the applicant's selection of an institution for continuing education.
 - College
 - Vocational School
 - Technical School
 - Other advanced study
- 4. The applicant's program of study must begin in the same year of graduating from high school.
- 5. Limit of \$1,000.00 for any one recipient.
- 6. The scholarship check will be issued to the institution for the benefit of the student.
- 7. The Selection Committee will be appointed annually by the Trustee and all decisions are final.
- 8. Recipients will be announced at the Pontiac Township High Schools Honors and Awards Night.

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APPLICATION

1.	Applicant				
		Phone			
	City, State, Zip				
	Email Address				
		High School Graduation Year			
2.	Please state your career plans, including the major field of study and the institution you plan to attend. Any past employment or experiences may be included.				
	Field of Study	Institution			
		•			
		M			
	· · · · · · · · · · · · · · · · · · ·	77770-V-1.			
		7-70°			
3.	List your participation in school activities a	and offices held			
<i>J</i> .	List your participation in school activities a	and offices field.			
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	-17 -164/4 LLA					
Are you applying for any other scholarships?	[] YES [
If yes, please list below and indicate the amount. Mark	k those scholarships received.					
Scholarship	<u>Amount</u> <u>Re</u>					
Name of Parent/Guardian						
Name of Parent/GuardianAddress_	•					
	lress					
Phone Email Add	Parents' Adjusted Gross Income from 2019 Federal Income Tax Form \$					
	ome Tax Form \$					
Parents' Adjusted Gross Income from 2019 Federal Inco						
Parents' Adjusted Gross Income from 2019 Federal Inco Father's Employment						
Parents' Adjusted Gross Income from 2019 Federal Income Father's Employment	umber of siblings in college:					

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Room and Board \$	•				
la fuana namanta accandia					
Indicate the amount of financial aid available from parents, guardian, or other organizations per year \$ If the financial aid is not cash, please explain:					
	[] Yes	[] No	
<u>Position</u>			<u>Earn</u>	<u>ings</u>	
			<u> </u>		
	· · · · · · · · · · · · · · · · · · ·				
nembers, who would at	test to yo	ır work	habit	s and	
<u>ss</u>		<u>Oc</u>	cupati	<u>ion</u>	
1	nent? nd earnings. <u>Position</u>	nent? [nd earnings. Position nembers, who would attest to you	nent? [] Yes nd earnings. Position nembers, who would attest to your work	nent? [] Yes [nd earnings. Position Earn members, who would attest to your work habit	

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12.	The application packet must include the following items.					
	 A. Completed Application with original signatures. B. Certified Transcript ~ identifying ACT Scores, GPA and Cla C. Letter of Recommendation from Teacher and Administrat D. Scholarship Instruction Sheet. 	•				
13.	All scholarship award checks will be payable to the institution for the benefit of the recipient.					
14.	The Selection Committee has the exclusive right to select scholarship recipients and all decisions are final.					
15. I certify that I have completed this application and all statements are true and correct of my knowledge.						
	Applicant's Signature	Applicant's Social Security #				
	Parent or Guardian's Signature	Date				