

# **Arkansas County Treasurers Association Scholarship Application**

## **Qualifications for those seeking scholarship:**

- 1. Attend college, graduate school, vocational, or other qualifying accredited educational institution.**
- 2. Show academic merit (minimum high school grade point 3.0 or college grade)**
- 3. Natural, adopted, or step child/grandchild of a current Arkansas County Treasurer, Current Deputy Treasurer, or Lifetime Member of ACTA.**

## **Instructions for completing application:**

- 1. Application is to be completed by applicant.**
- 2. All parts of application must be completed.**
- 3. Application must be typewritten or printed.**
- 4. The following must be attached to the application:**
  - a. Two (2) character reference letters.**
  - b. A complete high school transcript of courses taken and college transcript if applicable. Include grade point average and college entrance examination score (ACT or SAT)**
  - c. A biographical statement, including family and educational background, financial need, extracurricular activities, work activities and other pertinent information about yourself.**
- 5. Send completed application with attachments to:**

**The ACTA President, Terry McNatt, Craighead County Treasurer, P.O. Box 63, Jonesboro, AR 72403**

- 6. Completed applications must be received May 1st, to be considered.**

**Scholarships will be awarded at the June meeting.**

**NOTE: All parts of the application and attachments thereto are important to the grading of the application.**

ARKANSAS COUNTY TREASURERS ASSOCIATION  
SCHOLARSHIP APPLICATION

I. \_\_\_\_\_  
Applicants Full Name

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

II. EMPLOYMENT  
Current Employer \_\_\_\_\_

Position \_\_\_\_\_ Salary/Wage \_\_\_\_\_

Date of employment \_\_\_\_\_ To Present Number of hours worked per week \_\_\_\_\_  
(If currently working more than one job, include additional work information on reverse side of application.)

Previous employer \_\_\_\_\_

Position \_\_\_\_\_ Salary/Wage \_\_\_\_\_

Date of employment \_\_\_\_\_ To \_\_\_\_\_ Number of hours worked per week \_\_\_\_\_

III Are you the natural, adopted, or step child/grandchild of a current Arkansas County Treasurer, current Deputy Treasurer, or Lifetime Member of ACTA? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes to number III, list relatives name: \_\_\_\_\_ County \_\_\_\_\_

IV Are you the recipient of any other financial assistance in the form of scholarships and/or grants? Yes \_\_\_\_\_ NO \_\_\_\_\_  
If yes, please list total scholarships / grant received / awarded:

Scholarship / Grant from \_\_\_\_\_ Amount \$ \_\_\_\_\_

Scholarship / Grant from \_\_\_\_\_ Amount \$ \_\_\_\_\_

V Total household income:  
Under \$25,000 \_\_\_\_\_ \$25,001 to \$50,000 \_\_\_\_\_ \$50,001 to \$75,000 \_\_\_\_\_ \$75,001 and Up \_\_\_\_\_

VI Number of members in the household:  
Adults 65 & older \_\_\_\_\_ Adults 18 to 64 \_\_\_\_\_ Child(ren) under age 18 \_\_\_\_\_

VII Educational Institution applicant is currently attending:

\_\_\_\_\_

\_\_\_\_\_

VIII ACT Score \_\_\_\_\_ Cumulative High School GPA \_\_\_\_\_  
Cumulative College GPA (if applicable) \_\_\_\_\_

IX Educational Institution in which applicant has been accepted and plans to attend.

\_\_\_\_\_  
Institution's Full Name

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Course of Study - Degree Sought

\_\_\_\_\_  
Amount of Tuition / fees per semester

X WITNESSETH

Whereas, the undersigned attests that the information provided is true and accurate at the time of submission of the application; and  
Whereas, all necessary documentation is affixed and duly authenticated.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

IN WITNESS WHEREOF, I attest that the applicant's qualifications meet the requirements of the Arkansas County Treasurers Association Scholarship program.

\_\_\_\_\_  
County Treasurer's Signature

\_\_\_\_\_  
County

\_\_\_\_\_  
Date