Arkansas County Treasurers Association Eddie A. Jones 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 stepchild/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, Selena Blair, Columbia County Treasurer, P.O. Box 517, Magnolia, AR 71754

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 EDDIE A. JONES SCHOLARSHIP APPLICATION

Applicant's F	ull Name	Applicant's	s E-Mail Address	Applicant's Phone No.
Permanent M	ailing Address			
City			State	Zip
Age		Marital Status	# of Depend	lents
EMPLOYME Current Empl				
			ntNumber of hours worked nal work information on rev	
				orked per week
Lifetime Mer	nber of ACTA? Yes	N	0	Treasurer, current Deputy Treasurer, County
If yes to num	ber III-list relatives na	ime:		
Are you the r	ber III, list relatives na ecipient of any other fi list total scholarships	inancial assistance in	the form of scholarships a	
Are you the r	ecipient of any other fi list total scholarships	inancial assistance ir / grant received / aw	the form of scholarships an arded:	nd/or grants? Yes NO
Are you the r If yes, please	ecipient of any other fi list total scholarships Grant from	inancial assistance ir / grant received / aw	the form of scholarships an arded:	nd/or grants? Yes NO Amount \$
Are you the r If yes, please Scholarship /	ecipient of any other f list total scholarships Grant from Grant from	inancial assistance ir / grant received / aw	the form of scholarships an arded:	nd/or grants? Yes NO Amount \$
Are you the r If yes, please Scholarship / Scholarship / Total househo	ecipient of any other f list total scholarships Grant from Grant from bld income:	inancial assistance ir / grant received / aw	the form of scholarships ar arded:	nd/or grants? Yes NO Amount \$
Are you the r If yes, please Scholarship / Scholarship / Total househo Under \$25,00	ecipient of any other f list total scholarships Grant from Grant from bld income:	inancial assistance ir / grant received / aw 	the form of scholarships ar arded:	nd/or grants? Yes NO Amount \$ Amount \$
Are you the r If yes, please Scholarship / Scholarship / Total househo Under \$25,00 Number of m	ecipient of any other fillist total scholarships Grant from Grant from old income: 0 \$25,001	inancial assistance ir / grant received / aw 	the form of scholarships and arded:	nd/or grants? Yes NO Amount \$ Amount \$ \$75,001 and Up
Are you the r If yes, please Scholarship / Scholarship / Total househo Under \$25,00 Number of m Adults 65 &	ecipient of any other fillist total scholarships Grant from Grant from old income: 0 \$25,001 embers in the househo	inancial assistance ir / grant received / aw to \$50,000 ld: Adults 18 to 64	the form of scholarships and arded:	nd/or grants? Yes NO Amount \$ Amount \$

City	State	Zi	р	
ACT/SAT Score	Cumulative High School GPA			
Cumulative College GPA (if applicable) _				
NOTE: Must attach proof of ACT and/or S	SAT scores.			
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 /	Amount of Tuition / fees per semester		
WITNESSETH				
Whereas, the undersigned attests that the in application; and Whereas, all necessary documentation is at	nformation provided is true and accurate at the tim ffixed and duly authenticated.	e of submission o	of the	
Applicant's Signature	Da	ıte		
IN WITNESS WHEREOF, I attest that the Treasurers Association Scholarship program	e applicant's qualifications meet the requirements on m.	of the Arkansas C	ounty	