

**JOHN B. AND BROWNIE YOUNG MEMORIAL
SCHOLARSHIP PROGRAM
McLean County Renewal Application**

Introduction

The John B. and Brownie Young Memorial Fund was established in 1961 by Senator Gates F. Young to recognize deserving high school seniors graduating from high schools in the Owensboro, Daviess and McLean County public and parochial school districts. The scholarships are primarily intended for the first year of college, but scholarships may be and frequently are awarded for education beyond the freshman year. However, renewal applicants should keep in mind that there is no guarantee of an award beyond the freshman year. Renewal awards will vary each year.

BB&T Wealth acts as Trustee of the John B. and Brownie Young Memorial Fund. The trust is administered with the assistance of an Advisory Committee consisting of superintendents from each of the school districts whose students may receive scholarships from the trust.

Eligibility for renewal scholarship- McLean County Students only

To be eligible for a renewal Young Memorial Fund Scholarship, a student must have received an award for the preceding scholarship year, **be unmarried**, and plan to attend an accredited nonprofit college, university, or vocational/technical school on a **full-time** basis (12 credit hours). **Students must remain unmarried during the award year (fall & spring college semesters) or the award will be forfeited. Students must also remain a full-time student or the award will be forfeited.**

Awards

Amounts awarded vary greatly between recipients. In determining the amount of the award, the Trustee and Advisory Committee consider all relevant factors, including but not limited to the estimated family contribution (EFC) which is generated when the student files the FAFSA, and the average cost of attending the institution of their choice. Letters setting forth the amount of each scholarship award will be mailed to students in the summer.

Application Procedure

The application must be received by BB&T Wealth Division by May 1st. DEADLINES WILL BE STRICTLY ENFORCED. It is strongly recommended that each applicant file the Free Application for Federal Student Aid (FAFSA) early in the year in order to be considered for a scholarship amount greater than the minimum award. **A copy of the Student Aid Report from the FAFSA website showing your Estimated Family Contribution and your transcript is required before your application will be processed.**

Payment of Funds

Checks will be made payable to and mailed to the college or university. The checks will be issued the first week in August and the first week in December.

Questions should be directed to:

Martha F. Clark
(270) 683-3272

Debra Barany
BB&T Wealth
100 West 3rd Street
Owensboro, KY 42303
Phone (270) 688-7771 Fax (270) 688-7802
e-mail: dbarany@bbandt.com

McLean County Renewal Scholarship Application

John B. and Brownie Young Memorial Scholarship Fund
C/O BB&T Wealth
100 West 3rd Street
Owensboro, KY 42303

Applicant Instructions:

1. Complete all pages of this application as directed.
2. Return this application to BB&T before May 1.

Student Information:

First Name _____ MI _____ Last Name _____

Home Mailing Address _____ Apartment _____

City _____ State _____ ZIP _____ Cell Phone # (____) _____ - _____

Marital Status _____ Birth Date (MM/DD/YY) _____ Home Phone # (____) _____ - _____

Social Security # _____ - _____ - _____ E-Mail Address _____

Estimated Family Contribution _____ **I completed and attached a copy of the Student Aid Report from the FAFSA website to this application**
(Please select one) _____ **I am in verification and will send to BB&T once complete**
_____ **I am not completing the FAFSA**

Are you a graduate of McLean County High School _____ **Yes** _____ **No**

Year of High School Graduation _____

College Information:

In the fall I plan to attend _____

with a major in _____

I will be a _____ Freshman _____ Sophomore _____ Junior _____ Senior

_____ Graduate School

Student's Full Name (Please Print) _____

Describe your future plans and how the John B and Brownie Young Scholarship helped and/or will help you and your family to accomplish those goals. *(This section must be completed)*

APPLICATION CHECKLIST

STUDENT: KEEP A COPY OF YOUR COMPLETED APPLICATION PACKET

- I have completed my application
- I have attached my transcript
- I have attached a copy of the Student Aid Report from the FAFSA Website showing your Estimated Family Contribution (EFC)

****All attachments must be included to process your scholarship**

CERTIFICATION

I certify, to the best of my knowledge, that the information on this application is complete and accurate. Falsification of any information will cause my disqualification from the scholarship competition. I understand that it is my responsibility to return this complete application to BB&T Wealth Division by the deadline listed on the application. Furthermore, I understand that if my application is not complete, or if I do not submit my application by the deadline, I may be disqualified from receiving the scholarship. Once received, this application becomes the property of BB&T Wealth, the administrator of the scholarship.

Applicant's
Signature _____ Date _____

BB&T Wealth Management
100 West 3rd Street
Owensboro, KY 42303
Phone (270) 688-7771 Fax (270) 688-7802

**John B. and Brownie Young Scholarship Fund
Financial Aid Award Statement**

Student's Full Name (print): _____ Soc. Sec. # _____

I authorize the Student Financial Aid Office at _____
(college or university)
to provide the information requested on the back of this page to:

John B & Brownie Young Scholarship Program
c/o BB&T Wealth
100 West 3rd Street
Owensboro, KY 42303

By this document, I hereby give representatives of the Student Financial Aid Office permission to discuss my academic records and my financial circumstances with representatives of BB&T Wealth Management. You should interpret this document as conforming to the provisions of the Family Educational Rights and Privacy Act of 1974.

Signature of Student _____ Date _____

Signature of Parent (if applicant is under 18 years of age) _____

Student Home Address _____ Apt _____

City _____ State _____ Zip _____ Cell Phone (____) _____

Date of Birth _____ Home Phone (____) _____

High School _____

**Student Financial Aid Office:
IMPORTANT**

Place a copy of this document in my file so that it will be available if calls are received from BB&T.