

**John B. and Brownie Young Memorial Fund
Scholarship Application**

c/o Independence Bank Trust Department
2425 Frederica Street, Owensboro, KY 42301

Applicant Instructions:

1. Complete the application as directed
2. Attach a copy of Student Aid Report from FAFSA website showing Estimated Family Contribution
3. Return the application to your High School Counselor before April 26th.

Student Information:

First Name _____ MI _____ Last Name _____

Home Mailing Address _____ Apt# _____

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

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

Marital Status _____ Date of Birth (MM/DD/YYYY) _____ / _____ / _____

I am a senior at _____ Year of Graduation _____

In the fall, I plan to attend _____

Estimated Family Contribution: (please mark one)

☐ I have attached a copy of the Student Aid Report from the FAFSA website showing my EFC

☐ I am in verification and will send to Independence Bank Trust Department once it is complete

☐ I am not completing the FAFSA

I certify, to the best of my knowledge, the information on this application is complete and accurate and falsification of any information will result in my disqualification from the scholarship. I authorize my school to provide my estimated KEES award amount to the John B and Brownie Young Scholarship Fund.

Applicant's

Signature _____ Date _____

Guidance Counselor Instructions:

1. Sign and date Certification Statement
2. Return application with FAFSA Confirmation to the address above by May 7th.

I certify that, to the best of my knowledge, the information on this application is correct and this student ranked within the top one-third of the senior class.

Counselor's

Signature _____ Date _____