

Scholarship Objective

To provide financial assistance to person(s) with a Bank relationship who has been accepted to, or is enrolled in, an accredited institution, college, university, or school in the State of Indiana.

Scholarship Award Information

- ☐ The Citizens State Bank Community Scholarship, a one-time non-renewable \$5,000 scholarship
- ☐ Awarded to one eligible recipient each year and paid directly to the Bursar's office
- ☐ The Scholarship Selection Committee, determined by Citizens State Bank, will review applications received on or before March 31 of the current year
- □ In the event the chosen recipient receives a full scholarship from another source, cannot accept the award, or will not be attending school, the next qualified recipient in order of merit will receive the award
- ☐ The Committee will also resolve any questions or interpretations of the qualifications or factors in determining the recipient that may occur.
- ☐ The winner will be publicly announced no later than May 15.
- □ All information will be kept confidential and reviewed only by the Committee.
- ☐ This is an equal opportunity scholarship. Determination of the recipient will not be based on sex, race, religion, color, or national origin.
- □ Citizens State Bank reserves the right to increase, decrease, or terminate the scholarship at any time.

Applicant Requirements

All applicants must provide:

- □ A completed application. Applications will be accepted until March 31 of the year the scholarship will be awarded.
- □ Evidence of admission to, or enrollment in, an Indiana-based school, institution, college, or university.
- □ A copy of your official high school transcripts or official transcripts from any other schools attended since high school. A current cumulative GPA of 3.3 (B+) or above is required.
- □ Three letters of recommendation/reference. One letter must be employment or academic-related.
- □ A 500-word essay describing your career objectives and goals in obtaining further education.
- ☐ A copy of the FAFSA or a Statement of Financial Need.
- □ Their history of involvement in extracurricular activities, such as school activities, community or public service, volunteer work for nonprofit organizations, etc.
- □ Citizens State Bank client relationship information applicant, a relative, or guardian.
- □ Citizens State Bank associates and associates' families are excluded.

Factors in Determining Recipient

Our Scholarship Selection Committee will review:

- □ Financial Need
- □ Involvement and leadership in extracurricular activities
- □ Transcript and potential for success in pursuing future education
- □ Reference/recommendation letters
- □ Essay
- ☐ General Application

Online Application

Application Submission

Completed applications should be mailed to: Citizens State Bank; Attn: Marketing Department; PO Box C; New Castle, IN 4762 no later than March 31 of the current year.

1238 Broad Street • PO Box C • New Castle, IN 47362 • 888-529-5450 • www.mycsbin.com







Please return your completed application to any Citizens State Bank location or mail to: Citizens State Bank; Attn: Marketing Department; PO Box C; New Castle, IN 4762

Attach additional documentation if needed.

Name of Applicant			Date
Home Address			
City, State, Zip			
Date of Birth		Phone	
School Name			Current GPA
School You Plan to Attend		Anticipated Majo	or
Extracurricular Activities (include dates and any lead	dership positions held)		
Client Relationship(s)			
Name	Relationship	Account	#
Name	Relationship	Account	#
Name	Relationship	Account	#
In the event I am awarded the Citizens State Ba agents and employees the irrevocable and unre or members of my family, for the purpose of put medium. I hereby release Citizens State Bank a or video. I waive my right to any compensation.	stricted right to repro- plication, promotion, i	duce the photographs llustration, advertising,	and/or video images taken of me, or trade, in any manner or in any
I certify I have read the qualifications and factors I certify the information on this application is cor	•	•	•
Signature of Applicant If Applicant is under the age of 18,			Date
Signature of Parent or Legal Guardian of above-named minor			Date