

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

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.

CSB Scholarship Application



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 Major _____
(Attach letter of acceptance or current transcript)

Extracurricular Activities (include dates and any leadership positions held)

Client Relationship(s)

Name _____ Relationship _____ Account # _____

Name _____ Relationship _____ Account # _____

Name _____ Relationship _____ Account # _____

In the event I am awarded the Citizens State Bank Community Scholarship, I grant permission to Citizens State Bank and its agents and employees the irrevocable and unrestricted right to reproduce the photographs and/or video images taken of me, or members of my family, for the purpose of publication, promotion, illustration, advertising, or trade, in any manner or in any medium. I hereby release Citizens State Bank and its legal representatives for all claims and liability relating to said images or video. I waive my right to any compensation.

I certify I have read the qualifications and factors in determining the recipient and accept them without limitation. In addition, I certify the information on this application is correct, and that all the work I submit as part of this application is mine.

Signature of Applicant _____ Date _____
If Applicant is under the age of 18,

Signature of Parent or Legal Guardian of above-named minor _____ Date _____