

## **LOUISE BURK BEAN SCHOLARSHIP**

The Louise Burk Bean Scholarship Trust was established in 1976, by friends of Mrs. Louise Bean. Mrs. Bean was an English school teacher at the Atwood-Hammond School District for 29 years. The purpose of this fund was to aid a worthy scholar in furthering their education at a college or university.

The amount of the scholarship this year is \$**TBD** and will be made directly to the college on behalf of the recipient. The following are the guidelines established by the Trust:

1. Graduate from the Atwood-Hammond High School.
2. A reputation for good moral character.
3. Enrolled in a college or university of their choice.

This shall not be limited to those persons who are commencing their education as a freshman, but may be awarded to a person who is seeking to further his or her education at any undergraduate or graduate level.

Applications may be picked up and returned to the First State Bank Trust Department or the Atwood-Hammond Community Unit #39 Superintendent's office. All applications must be submitted on or before April 1<sup>st</sup>.

Patricia Appleby

**LOUISE BURK BEAN SCHOLARSHIP**  
**APPLICATION**

Date \_\_\_\_\_

Name \_\_\_\_\_  
                    *First*                    *Middle*                    *Last*

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ Telephone No (\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_

**Personal Information**

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Age \_\_\_\_\_

Social Security No \_\_\_\_ - \_\_\_\_ - \_\_\_\_

**College Enrolled in this Fall** \_\_\_\_\_

*\*\*Applicants must submit proof of college enrollment and full time class schedule prior to receiving scholarship payment.\*\**

**Other: High School and/or College Activities** (Example: Sports, Music, Art, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**High School Ranking:** \_\_\_\_\_ Out of \_\_\_\_\_ High School G.P.A. \_\_\_\_\_

**College GPA** (If Available) \_\_\_\_\_

**\*\*Please include a copy of transcript\*\***

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**College plans or course of study pursued and explain why:**

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**Financial Need – Please explain why you need this scholarship:**

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**Other monetary Grants or Scholarships received or applied for:**

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**This application must be submitted by April 1st to:**

**First State Bank  
Trust Department  
201 W Main Street  
Monticello, IL 61856**

**I HEREBY CERTIFY THAT THE STATEMENTS HEREIN ARE  
TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I  
HAVE ENCLOSED A COPY OF THE REQUESTED DOCUMENTS.  
I UNDERSTAND THAT IF ANY OF THESE DOCUMENTS ARE  
MISSING, MY APPLICATION WILL NOT BE PROCESSED.**

\_\_\_\_\_  
*Signature of Applicant*

\_\_\_\_\_  
*Date*