

WEALTH MANAGEMENT 90-92 Main Street, Wellsboro, PA 16901 Email: Trust@cnbankpa.com Phone: 570.724.0243 Toll Free: 800.487.8784 Fax: 570.724.8727

February 15, 2024

Re: Joseph R. Every Scholarship Fund

To Whom It May Concern:

First, please accept our apologies in the confusion the Every Scholarship application has created for you this year. It has come to our attention a key item from the FAFSA application has changed. The system no long produces the Expected Family Contribution (EFC) on the FAFSA print out. Instead, they have moved to the Student Aid Index (SAI). We were unaware of the change until sending out this year's scholarship information. The scholarship information sent at the beginning of the month requesting the EFC number has created a lot of confusion with student, parents/guardians, and school staff and to cut down on the confusion we have updated the application requesting the SAI information as a replacement for the EFC. We will accept either version of the application this year as we are sure some students have the application already complete minus the SAI information. The SAI number can be placed on the EFC line in these cases.

We understand that this information will not be released until the end of March by FAFSA. The original application deadline was set approximately a week prior to the end of the month. Given the release date, we will extend the due date of the application and supporting documents to April 12th. I updated the flyer with the new information for you to supply to the student. They can still access this information on C&N Bank website.

If you or the students should have any questions, please feel free to call me or Veronica Olin at (570) 724-0243 or toll free at (800) 487-8784. Thank you for your assistance with this scholarship.

Sincerely,

Edward K. Penner

Edward K. Penner Assistant Vice President and Trust Officer

THE JOSEPH R. EVERY SCHOLARSHIP FUND

Completed application and all supporting documentation must be returned to:

- Your Guidance Office by Monday, April 8, 2024 or
- A C&N office by Friday, April 12, 2024

Please type or print in ink.

PERSONAL DATA	
NAME:	
ADDRESS:	
CITY: STA	TE: ZIP:
TELEPHONE: Home: ()	Cell: ()
DATE OF BIRTH: EMAI	L ADDRESS:
FATHER'S NAME:	Cell: ()
OCCUPATION:	EMPLOYER:
MOTHER'S NAME:	Cell: ()
OCCUPATION:	EMPLOYER:
PARENT(S) EMAIL ADDRESS:	
NUMBER OF BROTHERS AND SISTE	ERS:
Are any of them attending college?	If yes how many?
If so, indicate where they are attending	g:
If someone other than your parents fina	ancially supports you, please indicate:
NAME:	RELATIONSHIP:
ADDRESS:	
CITY: STAT	TE:ZIP:
OCCUPATION:	EMPLOYER:
List any unusual expenses your parent	t or guardian has:

COLLEGE AND CAREER GOALS

 Name of the college you plan to attend:

 What major will you pursue?

 What degree do you expect to receive?

 What are your plans after receiving your degree?

NAME: _____

<u>COLLEGE COSTS FOR YOUR FRESHMAN YEAR (Do not include personal expenses)</u>

Tuition and Fees:

Room and Board:

	Books	and	Sup	plies:	
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PERSONAL CHARACTERISTICS

Do you smoke tobacco?

Do you use illegal drugs?

Do you use alcoholic beverages?

FINANCIAL INFORMATION

To be considered for this Scholarship it is required that you attach a copy of the portion of your Free Application for Federal Student Aid (FAFSA) form which sets forth the Student Aid Index (SAI).

EDUCATIONAL INFORMATION

GPA _____

Please attach a copy of your official high school transcript.

<u>ESSAY</u>

Please prepare a 200-250 word essay about yourself, your goals and objectives in life. The essay should be typewritten and double-spaced on a separate sheet of paper.

REFERENCES

Please attach to this application two letters of reference from organization leaders, business people or teachers who are not related to you.

Please attach copies of this page if additional space is needed.

EMPLOYMENT (During high school years only)

Employer	Type of Work	No. of Hours Per Week	Dates of emplo From: T	yment o:
Example: John Doe Restaurant	Wait staff	10	07/01/09 to	02/15/10

<u>COMMUNITY & VOLUNTEER ACTIVITIES</u> (During high school years only)

Organization Name	Type of Activity	No. of Hours Per Week	Dates of Involvement From: To:
Example: Big Brothers/Big Sisters	Mentoring	3	10/01/09 to present

<u>SCHOOL ACTIVITIES</u> (During high school years only)

Organization/Sport	Type of Activity	No. Hours Per Week	Weeks Per Year	Participation Years:
Example: Student Government	leadership	4	36	Fr, So, Jr, Sr

Date

Applicant's Signature

Name of High School

Print Name

ONLY COMPLETED APPLICATIONS RECEIVED BY THE DEADLINE AND ACCOMPANIED BY ALL REQUIRED SUPPORTING DOCUMENTATION WILL BE CONSIDERED FOR THIS SCHOLARSHIP.

C&N Wealth Management 90-92 Main Street, Wellsboro, PA 16901 1-800-487-8784

A complete application package must include:

- ____ Signed and dated Application
- ____ FAFSA with Student Aid Index
- ____ Official Transcript
- ____ Essay
- ____ TWO Letters of Reference

To type your application or for additional copies please visit:

www.cnbankpa.com/Every