



## WEALTH MANAGEMENT DIVISION

Scholarship Application for the following:

**Elgin and Genevieve Daily Scholarship Fund**

Requirements: Must be enrolled in an **agricultural** field of study at either Lake Land College or the University of Illinois **or** a music major at Millikin University in Decatur  
Must be a resident of either **Coles or Moultrie Counties**  
Must be a **full-time** student (12 or more credit hours)

## RE: Elgin and Genevieve Daily Scholarship Fund

Dear Applicant:

Attached is an application for a one-year grant from the above listed scholarship funds. The fully completed application must be submitted no later than April 15<sup>th</sup> to:

First Mid-IL Bank & Trust  
PO Box 529  
Mattoon, IL 61938  
ATTN: Laura Walk, Wealth Management Division

If you answer **yes** to any of the following questions, you are **INDEPENDENT** and do **NOT** need to provide parental information. If you answer no to all the questions, you are **DEPENDENT** and **MUST** provide parental information **including** the first two pages of their federal income tax return as well as your personal federal income tax return. If you remain uncertain as to whether or not you are considered independent, please contact any financial aid advisor.

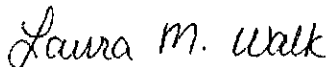
- If you are 24 years of age on January 1 of this year (Y N)
- Are you working on a master's or doctorate degree for the school year applied for? (Y N)
- Are you married? (Y N)
- Do you have children who receive one-half or more of their support from you? (Y N)
- Do you have dependents other than children who receive half of their support from you? (Y N)
- Are you or were you a ward of the court (until age 18) or are both of your parents deceased? (Y N)
- Are you a veteran of the US Armed Forces? (Y N)

Please note that you are applying for only one year and that it will be necessary for you to reapply each year that you will be attending school. Students are eligible to receive the scholarship for up to four years of their education.

We want to emphasize that it will be your responsibility to obtain applications in future years. Applications will be available at Mattoon High School or in the Wealth Management Division at First Mid-IL Bank & Trust. If you request that an application be sent to you, please enclose a self-addressed stamped envelope. We anticipate that future submission dates will be approximately the same.

Applicants will be notified by letter in the latter part of May or early June.

Sincerely,



Laura Walk  
Trust Administrator

Name: \_\_\_\_\_  
(Last Name, First Name, Middle)

**SCHOLARSHIP APPLICATION FOR:**  
First Mid-Illinois Bank & Trust, Trustee for:

**Elgin and Genevieve Daily Scholarship Fund**

Applicant name: \_\_\_\_\_  
(Last Name) (First Name) (Middle-Maiden if married)

Home address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

SS#: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Applicant's marital status: \_\_\_\_\_ Contact phone #: \_\_\_\_\_

Applicant normally lives with: \_\_\_\_\_

Parents' current marital status is: \_\_\_\_\_  
(Single, Married, Divorced, Separated, Widowed)

Name of Father/Stepfather: \_\_\_\_\_

Father graduated from \_\_\_\_\_ High School

Name of Mother/Stepmother: \_\_\_\_\_

Mother graduated from \_\_\_\_\_ High School

Mother's Maiden Name: \_\_\_\_\_

I am claimed as a dependent on the income tax return of \_\_\_\_\_

I (graduated/will graduate) on \_\_\_\_\_, from \_\_\_\_\_ High School

and apply for a scholarship as a college: (FR, SO, JR, SR, Post Secondary) (Circle one) at

\_\_\_\_\_  
(Name and address of College - Required) [ ] Full time [ ] Part-time

\_\_\_\_\_  
(Major) \_\_\_\_\_ Semester hours

(Please Note: If there is additional information that you believe is pertinent or would be helpful in the selection process, please attach a separate sheet. If you change colleges, please notify FMIB&T immediately to avoid a delay in the delivery of funds to your college of choice.)

EFC: \_\_\_\_\_  
(for office use only)

**INSTRUCTIONS: (Note: Current tax return required – first two pages)**

The following information of parents/stepparents and applicant is based on the last calendar year federal income tax figures. You are required to attach signed copies of the first two pages of your Federal Income Tax Return(s) to this application as well as copies of your parent's return, if applicable. Also, include the income amount of the applicant's spouse, if relevant, as well.

**HOUSEHOLD INFORMATION:**

The total size of the parents' household including parents, this applicant, and other dependent children (whether or not living at the home during the coming college year) – will be \_\_\_\_\_ people. Of the number, how many will be in college, including this applicant? \_\_\_\_\_ **The age of the oldest parent is \_\_\_\_\_.**

**INCOME INFORMATION**

|                                                                          | Parent                                 | Applicant/Spouse |
|--------------------------------------------------------------------------|----------------------------------------|------------------|
| 1. Income Earned from work (wages, tips, etc)<br><b>From W-2's Box 1</b> | (father) 1a _____<br>(mother) 1b _____ | _____            |
| 2. Untaxed Income and Benefits:                                          |                                        |                  |
| a. Social Security Benefits                                              | a _____                                | _____            |
| b. Aid to families with dependent children                               | b _____                                | _____            |
| c. Child support received for all children                               | c _____                                | _____            |
| d. Other untaxed income and benefits                                     | d _____                                | _____            |

**ASSET INFORMATION: (List Fair Market Value less debt or Mortgage on the asset as applicable)**

|                                                                   |          |          |
|-------------------------------------------------------------------|----------|----------|
| 3. Cash, savings, checking, money market accounts                 | \$ _____ | \$ _____ |
| 4. Residential real estate (excluding home)                       | \$ _____ | \$ _____ |
| 5. Other investments, stocks, bonds, mutual funds, annuities      | \$ _____ | \$ _____ |
| 6. Business, Net Liquidating Value                                | \$ _____ | \$ _____ |
| 7. Farm real estate held as an investment and not owner operated. | \$ _____ | \$ _____ |

Understanding that preference is to be given to applicants who are less financially able to obtain a higher education, we, the undersigned, being the applicant and, if appropriate, the parent(s) or guardian(s) of the applicant, do hereby request scholarship assistance to help meet the applicant's college expenses.

We further agree to submit signed income tax return(s) referenced herein to the corporate trustee.

The information in this application is confidential and will be used only for the purpose of determining scholarship eligibility.

We further understand that this application must be filed with the Wealth Management Division at First Mid-IL Bank and Trust no later than April 15<sup>th</sup> of the current calendar year.

I hereby authorize the Office of Financial Aid at the institution of higher education for which I am enrolled or may be enrolled, to release any and all information requested by the Wealth Management Division of FMIB&T that pertains to the processing of the scholarship for which I am applying.

Date: \_\_\_\_\_ Applicant: \_\_\_\_\_

Date: \_\_\_\_\_ Parent/Guardian: \_\_\_\_\_