## CLARENCE W & AMELIA BESS MOODY MEMORIAL SCHOLARSHIP

## PLEASE RETURN COMPLETED APPLICATION BY MARCH 15 TO:

Two Rivers Bank & Trust Attn: Two Rivers Wealth Management P. O. Box 728, 222 N. Main Street Burlington, IA 52601

## For Academic Year 2025/2026

Name:					
	Last	First	Middle		
Address: _					
_					
Date of Birth:	Phone:				
EMAIL _					
I have been accepted and	I plan to enroll at	<u>:</u>			
☐ at University o	of Iowa				
☐ at Southeastern	n Community Coll	lege, West Burling	gton, Iowa		
Major in College		Vocational G	Goal		
wiajoi iii College		vocational C	Joan		
ACT Composite Score		High	th School Attending		
Cum. Grade Point Avg. (I	Mid-Senior Year)	Rank	in Class Size of Class		
Names of Parents					
Father's Place of Employ	ment				
Mother's Place of Employ	yment				
Other Sources of Income (ie: Child Support, So	¢.				
Number of Dependent Ch	uildren Listed on It	ncome Tax Return	n		
Number of Dependent Ch	nildren in college n	next year (includin	ng yourself)		
Where do you work?  Annrox Monthly Income \$					

School Activities: (organizations, athletics, dramatics, music, etc.) Name each activity and any offices held. (Attach additional pages, if needed)	
Community Activities: (other than school activities) volunteer services, Scouts, church if any.	, etc. List positions of leadership,
Total annual cost for tuition, fees and books. \$	s plans, work earnings)?
\$How much will your parents contribute? \$	
1. Attach a letter from a member of your school's faculty as a reference with habits, and scholarship. Enter below the faculty member's name and a ph is most accessible.	
Name Phone No	
2. Attach a single page on which you inform us about: (1) your motivation college education and/or selecting your field of study, and (2) other inform selection committee in its selection process, including personal or family comments about the high cost of a college education. (This is your op yourself.) An application will not receive the selection committee's completed.	ation that would be helpful to the y circumstances. Avoid general portunity to tell us more about
3. Attach a transcript of grades from your school.	
1. Failure to provide all requested information may cause the application to be disregard	ded by the selection committee.
2. Permission is granted to release this information to persons responsible for the selection of recipients of scholarships.	
3. My school is authorized to release a transcript of my grades to the trustee and the scholarship selection committee.	
4. If I am awarded a scholarship and do not complete the first semester of study at the prescribed college, I agree to refund the scholarship award. (Extenuating circumstances may be reviewed by the committee.)	)
5. Permission is granted for a press release that includes my name and my award if I are	n a recipient.
Signature of applicant	
Signature of parent/guardian	
Date	