

## The Preston Family Annual College Scholarship

Completed applications **must be RECEIVED by May 2, 2022** in order to be considered.  
Mailing address is 308 Main Street, Conneaut, Ohio, 44030.  
Questions: please contact (440) 593-6120.

The Preston Family Annual College Scholarship awards scholarships up to the amount of \$2,500.00 each, and is available to first year or returning college students. There is a two-year award limitation.

### Eligibility Requirements

1. Grade point average must be at least 3.0.
2. Applicant must attend a non-profit college or university.

### Procedure for Selection:

1. Student must make application to the scholarship committee.
2. The committee will determine recipients based upon eligibility requirements, ability to succeed, character, and a record of community and school activities.
3. Finalists will be subject to an interview by members of the selection committee.

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Applicant's Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_

Occupation: \_\_\_\_\_ Occupation: \_\_\_\_\_

Family Annual Income – Combined Earnings (W-2s, 1099s, SSA, RRB, etc.):

\_\_\_\_ Less than \$30,000      \_\_\_\_ \$30,001 – \$60,000  
\_\_\_\_ \$60,001 – \$75,000      \_\_\_\_ \$75,001 – \$95,000      \_\_\_\_ over \$95,000

Student lives with:    \_\_\_\_ Father & Mother      \_\_\_\_ Father only      \_\_\_\_ Mother only  
                                 \_\_\_\_ Stepparent & natural parent      \_\_\_\_ Guardian

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**School Standing and Academic Information**

Rank in Class \_\_\_\_\_ Grade Point Average \_\_\_\_\_

A.C.T. Score \_\_\_\_\_ S.A.T. score \_\_\_\_\_

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**School/Community Activities**


(Please use only one additional page for further activities information if needed.)

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**Employment History (High School and/or College)**

Name of Employer: \_\_\_\_\_

Job Title: \_\_\_\_\_ Length of Employment \_\_\_\_\_

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Job Title: \_\_\_\_\_ Length of Employment \_\_\_\_\_

(Please use only one additional page for further employment information if needed.)

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**Educational Institution in which enrollment will occur or is occurring**

Name of School: \_\_\_\_\_

Field of Study: \_\_\_\_\_

Estimated Annual Cost of Attendance: \$ \_\_\_\_\_

**Actual Net Annual Cost of Attendance after applying all tuition waivers, scholarships, grants and all other credits toward costs: \$ \_\_\_\_\_**

List all names and amounts of other Scholarships and Grants: \_\_\_\_\_




