

**RALPH and MARY LOU McALLISTER
SCHOLARSHIP TRUST FUND
Application Form**

COMPLETE PART I or PART II.

PART I. Use this section if you are in high school or college.

PLEASE PRINT CLEARLY OR TYPE

Student's Full Name: Miss/Mr. _____

Social Security Number _____

Address _____ Telephone Number _____

_____ Birth date ____ / ____ / ____

Major Field of Interest _____ Date You Start College _____

College or University in which you are enrolled _____

Yearly cost of institution you are attending _____

How do you propose to finance your education? Check the appropriate line.

A. By parents _____ B. By Loans _____ C. By Earnings _____

D. Grants-PHEAA _____ PELL _____ Scholarship _____ E. Work Study _____

Please explain if necessary _____

Parent's or Guardian's Statement:

A. Father or Guardian

Name _____

Address _____

Phone Number _____

Occupation _____

B. Mother

Name _____

Address _____

Phone Number _____

Occupation _____

How many children in your family live at home? (Do not include yourself) _____

Ages _____

How many brothers or sisters in college _____ Where? _____

Extra Curricular Activities Grades 9 – Present _____

Offices or Leadership Positions Grades 9 – Present _____

Honors & Awards (state the year and nature of honor or award) _____

Community Activities _____

Hobbies _____

Work Experience (number of years): _____

Essay

Please attach an essay of 500 words or less in which you define what your involvement in your education has meant to you and how you hope to incorporate your education into your adult life.

Recommendations

Please submit three recommendations from non-relatives-at least one of which is a teacher or guidance counselor and one from a person familiar with your interest. Give each person you are requesting a recommendation from, a stamped envelope addressed to: Ralph and Mary McAllister Scholarship Trust Fund; c/o Armstrong Educational Trust, 81 Glade Drive, Kittanning, PA 16201.

My three recommendations will be requested from:

1. _____
2. _____
3. _____

List below any other factors you consider important in evaluating your scholarship application:

Part I Continued:

TO BE FILLED OUT BY THE GUIDANCE COUNSELOR

Grade Point Average _____ Class Rank _____
SAT Scores: Verbal _____ Math _____ Total _____

Please enclose a transcript of your grades

Signature of Guidance Counselor:

Please deliver or mail completed application to the Armstrong Educational Trust, 81 Glade Drive, Kittanning, PA 16201. Make sure to include your transcript of grades and essay.

Due date: MARCH 15

I declare that the information reported on this form to the best of my knowledge, is true, correct and complete.

Date: _____ Signature: _____

**RALPH and MARY LOU McALLISTER
SCHOLARSHIP TRUST FUND**

**PART II. Use this section if you have graduated high school or have a GED equivalency
and you are a self-supporting adult**

PLEASE PRINT CLEARLY OR TYPE

Name _____

Social Security Number _____

Address _____

Telephone Number _____

Birth date ____ / ____ / ____

Are you married or single? _____

High School from where you attended or graduated from _____

Major Field of Interest _____

Date You Start College _____

College or University in which you are enrolled _____

Yearly cost of institution you are attending _____

How do you propose to finance your education? Check the appropriate line.

A. By parents _____

B. By Loans _____

C. By Earnings _____

D. Grants-PHEAA _____ PELL _____ Scholarship _____

E. Work Study _____

Please explain if necessary _____

Employment record _____

Do you have any children or other dependents that you support? _____

If so, how many? _____

Ages _____

Of the above, how many are in college or post-secondary education? _____

Past and present community activities and leadership positions _____

Essay

Please attach an essay of 500 words or less in which you define what your involvement in your education has meant to you and how you hope to incorporate your education into your adult life.

Recommendations

Please submit three recommendations from non-relatives. Give each person you are requesting a recommendation from, a stamped envelope addressed to: Ralph and Mary McAllister Scholarship Trust Fund; c/o Armstrong Educational Trust, 81 Glade Drive, Kittanning, PA 16201.

My three recommendations will be requested from:

List below any other factors you consider important in evaluating your scholarship application:

Please deliver or mail completed application with the attached essay to the Armstrong Educational Trust, 81 Glade Drive, Kittanning, PA 16201. Make sure to include your essay. You may submit any other documentation (SAT scores, High School Transcripts, etc.) that can be used to evaluate your scholarship application.

Due date: MARCH 15

I declare that the information reported on this form to the best of my knowledge, is true, correct and complete.

Date: _____ Signature: _____