



**APPLICATION FORM FOR
ESTHER HUTMACHER PARRIOTT SCHOLARSHIP**

Application Deadline: March 15, 2024

(Please print or type)

Name: _____
Last First MI

Address: _____
Street City State ZIP

Date of Birth: _____ Age: _____ SSN: _____

Email: _____ Phone: _____

Is this address outside the corporate limits of the City of Freeport? Yes _____ No _____

Do you live in or near Scioto Mills, within the rectangle formed by the center line of the Cedarville-Lena Road from where it crosses the Pecatonica River, east down the center line to Rt.26, south down the center line of that road to where it intersects with the center line of West Winneshiek Road, west down the center line of that road to where it crosses with the center of the Pecatonica River, and north along the center of the Pecatonica River to the Cedarville-Lena Road.

Do you live inside this area?: Yes _____ No _____

Full name of Parent(s) or Guardian(s): _____

Address of Parent(s) or Guardian(s), if different from above: _____

Marital status of Parent(s) or Guardian(s):

Married Divorced Separated Deceased (Mother - Father)

High School: _____ Graduation Date: _____

Address: _____

Do you plan to attend a 2-year or a 4-year school?: 2-year _____ 4-year _____

College you will be attending: _____

Do you plan to major in agriculture or related field?: Yes _____ No _____

How many family members are, or will be, in college, not including yourself?: _____

Please answer the following questions as fully as possible-

List any honors and/or awards during your high school or college years:

School-Sponsored Activities:

	Name	Offices Held	Committee Assignments	Length of Membership or Participation
Clubs and Organizations				
Sports				
Other Activities				

Community Activities:

	Name	Offices Held	Committee Assignments	Length of Membership or Participation
Clubs and Organizations				
Other				

List any hobbies and/or special talents:

Indicate any full or part-time employment you have had:

Employer Name	Type of Work	Length of Employment

Please attach the most recent copy of the Parent(s)/Guardian(s) filed income taxes, which includes the Adjusted Gross Income (AGI), as well as the Signature page. We also do not need copies of the W-2 forms or of the various schedules.

If a copy of a tax return is not attached, please check here [] and explain why below.

Please also use the space below or attach another sheet to explain any special economic circumstances you feel are necessary in qualifying for our scholarship.

I verify that the information provided on this application, and other forms, is true and accurate to the best of my knowledge. If granted a scholarship, I agree to adhere to the rules and regulations now in existence or those that may be established in the future by the trust. I agree to permit information in this application and other records resulting from applying to be made available to the applicant's educational institution and for trust-approved research purposes. I authorize the release of any information and related forms, including academic, asked for in this application to the trustee.

I verify that the financial information and attachments are true and accurate to the best of my knowledge. I have attached copies of the Parent(s)/Guardian(s) most recently signed income tax returns.

Both the applicant and Parent/Guardian must sign.

Applicant's Signature: _____

Date: _____

Parent's/Guardian's Signature: _____

Date: _____

YOU MUST HAVE:

1. The completed application on file or postmarked no later than 4:00 p.m. on Friday, March 15, 2024
2. Your most recent transcript of grades from your high school and/or college attended, if applicable.
3. The most recent copy of the Parent(s)/Guardian(s) filed income taxes, which includes the Adjusted Gross Income (AGI), as well as the Signature page. We also do not need copies of the W-2 forms or of the various schedules.
4. A minimum of three letters of recommendations on file. These may be mailed directly to the ROE or included with your application. Please mail to the address below. If mailed must be postmarked no later than March 15, 2024

Please contact Chris Coy at ccoy@roe8.com or (815) 599-1408 with any questions

If any of the above items are not on file in the office indicated below by the application deadline date, your application will NOT be considered for the Esther Hutmacher Parriott Scholarship.

Esther Hutmacher Scholarship
Regional Office of Education 8
27 S. State Avenue, Suite 101
Freeport, IL 61032

The Esther Hutmacher Parriott Scholarship is based on equal opportunity and does not discriminate on the basis of race, color, religion national origin, sex, or handicap.



RECOMMENDATION FORM

Esther Hutmacher Scholarship
Regional Office of Education 8
27 S. State Avenue, Suite 101
Freeport, IL 61032

Due: March 15, 2024

Note: This form may be mailed directly to the above address or attached to the application.

Name of Applicant: _____

The above-named applicant has asked you to give the screening committee of the Esther Hutmacher Parriott Scholarship Fund an appraisal of his/her ability. Please complete the check list below, and also make any comments that you feel will be helpful in assessing his/her qualifications. This recommendation will become part of the applicant's file for the Esther Hutmacher Parriott Scholarship Fund held by the Regional Office of Education.

Rate the student by checking the appropriate number on the scale (five = high; one = low) :

	1	2	3	4	5
1. Motivation					
2. Self-discipline					
3. Leadership					
4. Concern for others					
5. Integrity					

Comments:

Name of Evaluator: _____ Phone Number: _____

School/Business: _____ Position Held: _____

Evaluator Signature: _____ Date: _____



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APPLICANT CHECKLIST

ESTHER HUTMACHER PARRIOTT SCHOLARSHIP

(PLEASE INITIAL ALL ITEMS AS COMPLETED AND RETURN WITH APPLICATION PACKET)

- _____ Correctly listed social security number on the application.
- _____ Listed name of the college or university I will be attending.
- _____ Included **signed** copies of my Parent(s)/Guardian(s) most recently filed income taxes.
- _____ Most Recent transcripts are attached.
- _____ A minimum of three (3) Recommendation Forms are attached to the application or being sent directly to the Regional Office of Education
- _____ My application has been **signed and dated** by both my Parent/Guardian and me.
- _____ My completed application and letters of recommendation are submitted or postmarked no later than 4:00 p.m. on Friday, March 15, 2024 to-

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27 S. State Avenue
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AM:cc