

BADER FAMILY CHARITABLE TRUST SCHOLARSHIP
HILLIARD LYONS TRUST COMPANY, LLC, TRUSTEE

SCHOLARSHIP APPLICATION

Initial Application

Renewal Application

Purpose of scholarship awards: To partially offset tuition costs of students from the Metro Louisville area who are the first generation in his or her family to attend college.

Selection Criteria: Scholarships are based on family educational history, student need, and overall student achievement.

Scholarship Amount: Individual scholarships (and renewals) are up to \$10,000 per year.

Renewals: Scholarship recipients are eligible to have their scholarship renewed for three successive annual renewal periods. To be eligible for renewal a recipient must:

- A. Be considered a full-time student by the school, and
- B. Maintain a minimum "2.5" grade point average ("GPA") during the first year and a minimum of "2.75" GPA during any successive year. GPAs are based on a scale in which "4.0" is the highest possible grade attainable.

A. Application Filing

1. If you are currently enrolled in high school, your application with all required attachments must be received by Hilliard Lyons Trust Company, LLC, no later than March 1st. If this date falls on a weekend or holiday, the application must be turned in on the last day prior to March 1st. **(FOR 2021, THE DEADLINE IS EXTENDED UNTIL MAY 1st)**

If you are applying for renewal, your application with all required attachments must be mailed to the Hilliard Lyons Trust Company, LLC, with a postmark no later than June 1st. Renewals require a copy of the college transcript containing the most recent Spring semester grades.

2. I understand that official transcripts must be received by the deadline date in order for my application to be considered. They must be in a sealed envelope from the school you are attending.

Mail to: Hilliard Lyons Trust Company, LLC
Bader Family Charitable Trust Scholarship
PO Box 32760
Louisville, KY 40232-2760

INITIAL HERE: _____

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B. Personal Data

1. Full Name (*First Middle Last*):
2. Telephone Number:
3. Email:
4. Date of Birth:
5. Last four digits of your SSN:
6. Permanent Address including ZIP code:

C. Family Educational History

Are you the first generation in your family* to attend college? Y / N

** Family is to be understood as parents and grandparents*

D. Household Income

Please provide a copy of your Student Aid Report (SAR). Your SAR is generated after you have submitted your Free Application for Federal Student Aid (FAFSA).

E. Academic Status

High School:

High School Graduation Date:

Upcoming College Level: Freshman Sophomore Junior Senior

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F. Other Activities

Employment (*Employer, dates employed, average number of hours per week, and any leadership roles*):

Extracurricular Activities (*Activity, dates involved, average number of hours per week, and any leadership roles*):

Volunteer Activities (*Activity, dates involved, average number of hours per week, and any leadership roles*):

Other Awards or Achievements:

G. College

Name of college/university you plan to attend/are attending:

Student ID Number (if assigned):

Academic Field of Study (major):
(minor, if any):

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H. Authorizing Signatures

To the best of my knowledge and belief, I attest that the information contained in this Scholarship Application is true, correct, and complete. I understand that this application does not commit the trust to award a scholarship or to pay any costs incurred in the submission of the application. Decisions of the Advisory Committee are final.

Applicant Signature

Date

Parent/Legal Guardian Signature

Date

FOR CURRENT HIGH SCHOOL STUDENTS ONLY: *This section is to be filled out by the High School Guidance Department. Please attach a certified high school transcript to include grades of the first semester of the senior year.*

TO BE COMPLETED BY GUIDANCE COUNSELOR

Applicant Name: _____ Last four-digits of SSN: _____

Note: *(Advisory committee will not see identifying information)*

Scholastic Profile

Name of Counselor: _____

The student ranks _____ in a class of _____ Cumulative GPA: _____/4.0 scale

Does school use a weighted grading system? Yes No Explain: _____

My signature below signifies that the above information is true and correct.

Guidance Counselor

Date