

### O.J. Stout Scholarship Fund

Application for Financial Assistance for 2025-2026 School Year

Deadline: March 31, 2025

The 2025-2026 Scholarship Application must be completed and postmarked with the following attachments by March 31, 2025 in order to be considered for the upcoming school year. If you do not have all the requirements attached, your application will not be reviewed. No courtesy calls will be made in the instance of incomplete applications. Please complete all fields on this application, even if you are reapplying for the scholarship. Please feel free to send your application by certified mail to confirm it is received by the due date, or you may call to confirm. If you drop your application off in person you may ask for a receipt.

#### Your application must include:

- A copy of your household's most recent annual income.
  - This must be from the person who claimed the student or the student's return. This can be provided from their 1040 or the student's <u>completed</u> FAFSA (Free Application for Federal Student Aid Form).
- A copy of fall/winter 2024 grades
  - We do not require an official transcript, but it is imperative that your full name and your cumulative G.P.A. are included on the grade report submitted. A separate copy of your grades is required for this application. If you have submitted your grades for another purpose do not assume they will be included for this application.
- A brief essay on: (1-2 paragraphs)
  - "Briefly describe your long- and short-term goals." This is required by all applicants.

#### Please submit to:

United Bank Attn: Scholarships 514 Market Street Parkersburg, WV 26101 Or email to: ojstout@bankwithunited.com



### Criteria | O.J. Stout Scholarship Fund

Under the provisions of this trust, the following criteria has been established.

- 1. Applicants must be young men residing in Wood County or an adjacent West Virginia county.
- 2. Recipients must be selected primarily on the basis of need, but other factors should also be considered.
- 3. Preference will be given to students who are studying to become ministers at West Virginia Wesleyan College, Buckhannon, West Virginia.
- 4. All recipients must be graduates of an accredited high school or equivalent and have exhibited ability, desire and willingness to pursue their education for a professional or business career.
- 5. All recipients must maintain at least a 2.0 or "C" grade point average in order to be eligible for the award. Also, the recipient must maintain full-time status per semester at the institution they attend. If either of these are not met the recipient will be required to return funds for the semester he does not qualify.
- 6. The recipient will be responsible for providing the trustee with a copy of his grade report (including the student's full name and cumulative G.P.A.) after the completion of each semester. In addition, it is the duty of the recipient to advise the trustee of any changes he makes in his course of study or the University or College he is attending.
- 7. No award shall be automatically renewed. Each award will be made on an annual basis provided that the recipient meets the criteria and provides a complete application no later than March 31 each year.
- 8. All loan recipients shall sign a negotiable promissory note for 20% of the award received. All promissory notes will bear interest at the rate of (3) three percent per annum commencing (5) five years after the recipient has discontinued his schooling. Terms for repayment of the loan will be outlined in the promissory note.
- 9. Recipients of awards shall receive one-half (1/2) of the total amount awarded at the beginning of the fall semester and one-half (1/2) of the award at the beginning of the spring semester, assuming that the grade point average and other criteria have been met during the first semester.



	sed by		
Signatu	re	Date	
Having r	read and understanding the requirements, I a	ccept the terms and conditions:	
	Trust Department as administrator of the scholar	ship. This responsibility continues until hi	s note is paid in full.
10.	It will be the responsibility of the recipient to kee	p his address and educational status curre	ent with the United Bank

United Bank and its Wealth Management Department were not involved with the development of the terms, conditions, and qualifications for this scholarship. Each scholarship fund is a legal entity separate and apart from United. The terms, conditions, and qualifications for each scholarship fund were crafted by the creator(s) of that scholarship fund. United Bank and its Wealth Management Department Group serve solely in a capacity where it administers each scholarship fund in accordance to the terms, conditions, and qualifications of the particular scholarship fund.



Contact Information		
Full Name		
Birth Date		
Street Address		
City, State, Zip		
County		
Telephone (home)	(mobile)	<del></del> -
Parent Phone		
Applicant Email		
Parent Email		
Last four digits of social security number: _		
Are you related to anyone working at Unite	ed Bank? Yes No	
Name	Relationship	
Name	Relationship	
Name	Relationship	



Prior Awards								
Have you previo	ously beer	n awarded this scholars	ship?	Yes No				
If yes, please co	mplete th	ne following, listing sch	olars	hip year and amo	unt received.			
Scholarship Year		2024-2025		2023-2024	2022-2023 2021-		21-2022	
Award Amoun	t							
Education Histor	ory		I					
	Ν	Name of Institution		Addre	ess		ates ended	GPA
High School Attended						From To		
College Attended						From		
Other						From		
ACT Scores:	Comp _	SAT Sc	ores:	. Comp				



# College Information First choice of college or university City and State Second choice college or university \_\_\_\_\_ City and State Major or field of study \_\_\_\_\_ Expected Graduation Date: \_\_\_\_\_ Classification for the upcoming academic year: Freshman \_\_ Sophomore \_\_ Junior \_\_ Senior \_\_ Graduate Level \_\_ Will you be a full-time student during the school year of 2025-2026? Yes \_\_\_ No \_\_\_ If no, please explain: Based on your current (or researched) expenses, please list your anticipated expenses for the upcoming academic year: Books \_\_\_\_\_ Room \_\_\_\_\_ Tuition \_\_\_\_\_ Board \_\_\_\_\_ Total anticipated expenses \_\_\_\_\_

Please attach a letter to explain any special circumstances.



Please provide information for all family members living in your household:

Name	Relationship	Age	Occupation/School

any