GIBSON-BRISCOE CHARITABLE TRUST

The Trust was founded in 2021 by Sarah E. Briscoe (nee Gibson) of Elizabethtown, Illinois, with the intention of assisting educational institutions (K-12) to develop and operate programs related to music, drama, and the arts in Southern Illinois and to provide students and teachers who are residents in or working in Southern Illinois with funding to pursue further education in those fields. It primarily targets Hardin, Pope, White, Hamilton, Saline, Gallatin, Massac, and Johnson counties. All applications are due March 1st each year

*Grants can be used to develop and operate programs related to music, drama, and the arts. *Grants can be used to by students and teachers within the educational institution, public and private, (K-12) to attend camps, workshops, and/or other related activities within they pursue and develop further skills and education in the fields of music, drama, and the arts.

*Grants can be used for the acquisition of musical instruments and/or equipment to further enhance music, drama, and the arts.

*Scholarships can be awarded to graduating high school students who plan to pursue higher education in the fields of music, drama, and the arts. And to post-graduate students who wish to continue their studies in those fields.

Candidates will be notified in May of the success of their application.

All applications should be emailed to Marilyn.Enteman@usbank.com

If you have any questions, you can call 217-753-7578 or email: Marilyn.Enteman@usbank.com

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Gibson-Briscoe Charitable Trust Scholarship Application

Dear applicant, Please fill out the application form in as much detail as possible. It is important for the members of the Trust's advisory board to be able to form as complete a profile of each candidate as possible in order to make an informed judgement. One reference letter from a teacher is required. Scholarships can be awarded to high school students who plan to pursue higher education in the fields of <u>music, drama, and the arts</u> and to post graduate students who wish to continue their studies in those fields.

Candidate Contact Information

First Name(s):

Middle Name:

Surname:

Date of Birth (mm/dd/yyyy)

Place of Birth:

Social Security Number:

Home Address:

Mailing Address (if different):

County of Residence in Southern Illinois:

Telephone number(s):

Email address:

Candidate's Family Information

Parent 1 (or Guardian)

Full Name:

Address:

Tel. number:

Email:

Occupation:

Current Employer:

Level of Education:

Parent 2

Full Name:

Address:

Tel. number:

Email:

Occupation:

Current Employer:

Level of Education:

Parents'Marital Status (married, divorced, widowed, other):

Number of siblings:

Any family circumstances that put an unusual demand on parents financial situation:

Candidate's High School Information

Current High School Name and County:

Graduation Date:

Years attended:

Other high schools attended (include names and dates below).

GPA:

Class Rank and Size: ____/ ____

(Please enclose a transcript of your High School Record.)

Extra Curricular Activities you have participated in:

Candidate's University Information

University you plan to attend (you may include more than one):

Planned Enrollment Date:

Degree you plan to major/minor in:

Career field you wish to pursue after graduation:

Estimated annual cost: Tuition \$_____

Do you plan to live at home or on campus? _____

Room and Board \$

Other (please specify): \$_____

Total: \$_____

Financial Funding Information

What is your parents' total annual income in an average year?

How much do you and your parents plan to contribute financially to your university expenses?

Do you plan to seek financial aid? (If yes, specify source of aid and amount)

Are there any extenuating circumstances that place you in a position of financial need at this time? If so, please explain.

List any other information you believe should be considered by the Board of Control before granting scholarship funds.

Have you been awarded or are you seeking any university scholarships? (If yes, specify source and amount).

All checks will be sent directly to the college or university with the understanding that all funds will be returned if a subsequent scholarship for tuition is obtained.

I due declare that the information I have provided here is bonafide.

Applicant Signature: _____ Date: _____

Parent Signature:		Date:
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