



F.N.B. Wealth Management



CATHARINE GUYER SCHOLARSHIP FUND

C/O APFELBAUM KULA, P.C.
43 S. FIFTH STREET
SUNBURY, PA 17801
(570)286-0210

2024 SCHOLARSHIP APPLICATION GUIDELINES

Application Deadline: **May 3, 2024**

The Catharine Guyer Scholarship Fund, with funding support from the G. Scott & Bessie K. Guyer Foundation, provides this scholarship opportunity to 2024 graduating high school students within the Selinsgrove and Shikellamy School Districts. The educational funds are administered exclusively for the student's further undergraduate educational needs with primary consideration given to the applicant's actual need and desire to further their education.

Application Process

1. Complete the attached Scholarship Application and submit it to your high school's Guidance Department by **May 3, 2024**.
2. Include a copy of the letter of acceptance from the post-secondary institution you'll be attending. If you are undecided at this time, your final decision information will need to be provided if you are a recipient of a scholarship award.

Applications with incomplete or missing information will not be considered.

For questions regarding the Scholarship Application process, please contact Brianna Apfelbaum Kula at (570)286-0210 or brianna@apfelbaumkula.com.



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APPLICATION FORM

2023-2024 Academic Year

Please complete the following:

1). Applicant Information:

Name of Applicant: _____

Permanent Address: _____

Social Security No.: _____ Date of Birth _____

Phone Number: (____) _____ Email _____

Name of High School: _____

Graduation Date: _____

2) How many siblings under the age of 18? _____

3) How many of your siblings are enrolled in a higher education program (College/Trade School)? _____

4) Is continuing your education contingent upon you receiving financial aid?

Yes No

5) How will you contribute toward your education costs:

Part-time work Work during vacation and breaks

Student Loans – Please state annual amount of loans \$ _____

Other: _____

6) Are there any special circumstances or economic hardships connected to your financial need? _____

7) Please provide the amount of support provided by the parent(s) or guardian(s) that claim you as a dependent. (*Note*, this information is available on their most recently filed tax return or W-2):

Annual gross salary, Pension, or SSI, or Social Security for mother	\$ _____
Annual gross salary, Pension, or SSI, or Social Security for step-mother	\$ _____
Annual gross salary, Pension, or SSI, or Social Security for father	\$ _____
Annual gross salary, Pension, or SSI, or Social Security for step-father	\$ _____
Child support received	\$ _____
Child support paid	\$ _____

8) What college/university to you plan to attend? _____

(Please provide a copy of the letter of acceptance received. If you are undecided at this time, your final decision information will need to be provided if you are a recipient of a scholarship award.)

9) Student ID Number, if assigned: _____

10) What is your major or course of study? _____

11) Give a brief description of your career goals: _____

12) We invite you to attach a one-page essay to briefly provide any other information that you feel will help us make a decision on your application. For example, describe yourself, why you are applying for this Scholarship, etc.

All of the above information included in this application and its attachments are true and accurate. If for any reason I fail to complete the term or terms for which this aid may be given, I will return any the funds awarded back to the Committee:

Applicant Signature

Date