

# PETER C. VAN VLACK SCHOLARSHIP

## APPLICATION

Completed application and all supporting documentation must be delivered or postmarked and mailed by April 20, 2026 to one of the following:

- a) Capital First Trust Company, 700 W Virginia Street, Suite 500, Milwaukee, WI 53204
- b) Stone House Financial Planners, 319 Main Street, Towanda, PA 18848 OR 107 S. Elmer Ave., Sayre, PA 18840
- c) Your school guidance office, if allowed. Please consult with your school.

## PERSONAL DATA

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Father's Name:** \_\_\_\_\_ **Cell:** \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

**Mother's Name:** \_\_\_\_\_ **Cell:** \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Parent(s) Email: \_\_\_\_\_

Number of siblings: \_\_\_\_\_

Are any of siblings currently attending college? If yes, how many? \_\_\_\_\_

If so, indicate where they are attending: \_\_\_\_\_

Do you live with:      Both Parents      Mother      Father      Other

**If someone other than your parents support you, please indicate the following:**

**Name:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Occupation:** \_\_\_\_\_ **Employer:** \_\_\_\_\_

Name: \_\_\_\_\_

**EMPLOYMENT**  
(During high school years only)

Employer Name	Position or duties	Hours/week	Start and end dates of Employment
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Do you plan to work part time during the college school year? \_\_\_\_\_

Do you plan to work during the summer? If so, full or part time? \_\_\_\_\_

**COMMUNITY & VOLUNTEER ACTIVITIES**  
(During high school years only)

Organization Name	Describe Activity	Hours/week	Start and End Dates
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Indicate what types of activities you plan to participate in while attending college, if any \_\_\_\_\_

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**SCHOOL ACTIVITIES**  
(During high school years only)

Organization/Sport	If non-athlete, describe involvement	Hours/wk	Weeks/yr	Years of Participation
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Will you be involved in any school activities while attending college? If so, please list here or attach additional sheets. \_\_\_\_\_

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Name: \_\_\_\_\_

### COLLEGE AND CAREER GOALS

What major will you pursue? \_\_\_\_\_

What degree do you expect to receive? \_\_\_\_\_

What are your plans after receiving your degree? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### COLLEGE COSTS FOR YOUR FRESHMAN YEAR

(Do not include personal expenses)

Name of college you plan to attend: \_\_\_\_\_

Tuition and Fees: \_\_\_\_\_

Room and Board: \_\_\_\_\_

Books and Supplies: \_\_\_\_\_

Total Cost: \_\_\_\_\_

First alternate college you plan to attend: \_\_\_\_\_

Tuition and Fees: \_\_\_\_\_

Room and Board: \_\_\_\_\_

Books and Supplies: \_\_\_\_\_

Total Cost: \_\_\_\_\_

**Please attach a copy of tuition/cost page from the above referenced schools, your student financial aid package and any acceptance letters you have received.**

Name: \_\_\_\_\_

### FINANCIAL INFORMATION

To be considered for this scholarship it is required that you supply the following information:

2023 Adjusted Gross Income (AGI) (parents filing separately should list each parent's AGI):

Parents: \_\_\_\_\_

Student: \_\_\_\_\_

Expected Family Contribution (EFC) from your Free Application for Federal Student Aid (FAFSA). **You are required to attach the first page of your FAFSA Electronic Student Aid Report (SAR) showing your EFC** ("Viewing your processed information" upon logging into your FAFSA account will take you to the SAR.)

EFC: \_\_\_\_\_

List any unusual expenses or circumstances your parent or guardian has: \_\_\_\_\_

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### EDUCATIONAL INFORMATION

GPA: \_\_\_\_\_

Attach a copy of your official high school transcript.

### ESSAY

Prepare a 250–300-word essay about a time in your life that has shaped you as a person. Describe how this has influenced your chosen field of study. The essay should be typewritten and double-spaced on a separate sheet of paper.

### REFERENCES

Attach to this application a total of two letters of reference, from people who are not related to you.

The first letter must be from a non-school related individual. We suggest employers, businesspeople and community or other organizational leaders.

The second letter must be from a teacher, coach, activity leader, or a member of the administrative staff from the school you currently attend or have formerly attended. School Personnel should use the "School District Recommendation" form, included in this application.

Name: \_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Name of High School

\_\_\_\_\_  
Print Name

**ONLY COMPLETED APPLICATIONS ACCOMPANIED BY ALL REQUIRED  
SUPPORTING DOCUMENTATION RECEIVED BY THE DEADLINE WILL BE  
CONSIDERED FOR THIS SCHOLARSHIP.**

**COMPLETED APPLICATIONS WILL INCLUDE:**

\_\_\_ Signed and Dated Application

\_\_\_ Any Applicable Acceptance Letters

\_\_\_ FAFSA with Estimated Family Contribution

\_\_\_ Official Transcript

\_\_\_ Essay

\_\_\_ TWO Letters of Recommendation

\_\_\_ One from member of the community.

\_\_\_ One from school district ("School District Recommendation" form).

Name: \_\_\_\_\_

## PETER C. VAN VLACK SCHOLARSHIP

### SCHOOL DISTRICT RECOMMENDATION

**Applicants:** Recommendation to be completed by a teacher, coach, advisor, or administrator.

**School District Personnel:** Please rate the personal qualities of this student as outstanding, above average, average, or below average. A written recommendation is also required. Please use the space below and attach a separate sheet if necessary.

Quality	Outstanding	Above Average	Average	Below Average
Cooperativeness				
Respect				
Initiative/Work Ethic				
Leadership				
Personal Contact				
Trustworthiness				
Maturity				

School District Personnel's written recommendation:

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School District: \_\_\_\_\_

Position: \_\_\_\_\_

School District Personnel's Printed Name: \_\_\_\_\_

School District Personnel's Signature: \_\_\_\_\_

(Signature)

(Date)