

2026 GLADYS TOZIER  
MEMORIAL  
SCHOLARSHIP AWARD

FAMILY FINANCIAL RECORD

Student's Name \_\_\_\_\_

Taxable income (Parent's) .....\$ \_\_\_\_\_  
(Federal Income Tax Return)

Father's gross income before taxes .....\$ \_\_\_\_\_

Mother's gross income before taxes .....\$ \_\_\_\_\_

Other income not included above  
(pensions, social security, dividends) .....\$ \_\_\_\_\_

Student's income other than part-time work and  
student loans (social security, dividends) .....\$ \_\_\_\_\_

Number of dependents .....\$ \_\_\_\_\_

Number of dependents now in college .....\$ \_\_\_\_\_

Emergency expenses .....\$ \_\_\_\_\_

Outstanding debts (mortgages, medical bills, etc.) .....\$ \_\_\_\_\_

Do you own a business or farm? Yes\_\_\_\_ No\_\_\_\_

Value of bank accounts .....\$ \_\_\_\_\_

Value of other investments (stocks, bonds, etc.) .....\$ \_\_\_\_\_

Any unusual circumstances - please explain \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**IMPORTANT REMINDER TO APPLICANT:** You must attach to this application copies (for you and your parents) of:

**Federal Income Tax Forms- Remove All Tax Id's and bank account numbers**

NAME \_\_\_\_\_

Date \_\_\_\_\_ Signed by \_\_\_\_\_  
(Parent or Guardian)

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Student's Name \_\_\_\_\_

NAME OF HIGH SCHOOL \_\_\_\_\_

ADDRESS OF HIGH SCHOOL \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

NAME OF HIGH SCHOOL GUIDANCE COUNSELOR: \_\_\_\_\_

GUIDANCE TELEPHONE NUMBER: \_\_\_\_\_

COUNTY OF RESIDENCE OF APPLICANT: \_\_\_\_\_

ANTICIPATED FINANCIAL AID  
SCHOLARSHIPS FROM OTHER  
SOURCES:

AID: \_\_\_\_\_

SCHOLARSHIP: \_\_\_\_\_

OTHER SOURCES: \_\_\_\_\_

\_\_\_\_\_

S.A.T. VERBAL SCORE \_\_\_\_\_  
MATH SCORE \_\_\_\_\_

High School Class Rank \_\_\_\_\_ of \_\_\_\_\_

Grade Point Average \_\_\_\_\_

Respectfully submitted,

\_\_\_\_\_  
Signature of Student Applicant

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

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

\_\_\_\_\_

Phone: \_\_\_\_\_

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

**IMPORTANT: PLEASE INCLUDE THE LETTER OF ACCEPTANCE FROM THE COLLEGE  
TO BE ATTENDED.**

Student's Name \_\_\_\_\_

I. List your school activities:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

II. List your community activities and church activities:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

III. List any special honors:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

IV. Brothers and/or sisters: (please check)

Name	Age	In School	In College
_____			
_____			
_____			

V. Additional comments you may feel helpful to the selection committee:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

VI.  
Intended field of study in college:

\_\_\_\_\_  
\_\_\_\_\_

Student's Name \_\_\_\_\_

VII. Explain what your goals in life are and why?

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VIII. How will your character affect or impact your chosen career?

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IX. What activity that you have been involved in your life thus far has been the most rewarding and why?

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X. Explain any special financial need you or your family may have at this time?

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Student's Name \_\_\_\_\_

Names, addresses, and telephone numbers of two character witnesses:

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

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

Phone: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_

**IMPORTANT CHECKLIST, PLEASE INCLUDE:**

1. All Five Pages of this application
2. Parents' Federal Income Tax Return
3. Student's Federal Income Tax Return
4. Letter of Acceptance from the College to be attended.

## **A NOTE ABOUT THE DONOR OF THIS AWARD**

Miss Tozier, a graduate of the Goucher College and Columbia University, was a professional Librarian. In addition to other positions, Ms. Tozier served as referenced librarian for the New York City Public Library.

She was a historian and very interested in the education of young people. Because she lived at various times in Clearfield, Elk, and Lycoming Counties, this scholarship was established for one student in each county.

Miss Tozier died in May 1990 at the age of 96. Under the terms of her Will, she established the Gladys A. Tozier Scholarship Fund with Manufacturers and Traders Trust Company.