2025

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

Date Received

Mason County

Community First Fair Scholarship

**OFFICIAL APPLICATION FORM**

**SUBMISSION DEADLINE:** Friday, May 16, 2025

**SUBMIT TO:** any **Ohio Valley Bank Office** in Mason County, WV

OVB Pt. Pleasant Office: 328 Viand Street, Pt. Pleasant, WV

OVB Bend Area Office: 156 Mallard Lane, Mason, WV

OVB Pt. Pleasant North Office: 2509 Jackson Avenue, Pt. Pleasant, WV

**Application must be accompanied by:**

1. Copy of your high school transcript
2. ACT or SAT score report

Please place application in a sealed envelope.

**I. Personal Information**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_ Sex: Male Female

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

Street City State Zip

Phone Number: ( ) - Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**II. High School Information**

Name of high school and graduation date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

List honors/Advanced Placement Courses taken (i.e. English II Honors): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**III. College Information**

Name of School in which you plan to enroll:

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

Name of School City/State

Have you been accepted? Yes No

Intended major field of study: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**IV. References**

Give the name, addresses and phone numbers of two character references.

1) Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number: ( ) -

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

Street City State Zip

2) Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number: ( ) -

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

Street City State Zip

##### **V. Essay**

Indicate in a paragraph or two why you deserve to win this scholarship, how you plan to use the funds and how it would contribute to your education.

**VI. Grade Certification Form**

Student’s Name: \_\_\_\_\_

School Name:

At the close of the most recent semester, the applicant ranked \_\_\_\_ in a class of \_\_\_\_\_.

At the close of the most recent semester, the applicant’s cumulative GPA was \_\_\_\_\_\_\_\_ on a scale of 4.0.

The GPA is Weighted Non-Weighted

**SAT Scores OR ACT Scores:**

Composite:

**VII. Activities and Work Experience**.

Using *only the space provided below*, please list all extracurricular, community, and personal activities in which you have participated. Include clubs, sports, student government, fine arts, church, volunteer work, youth programs, athletic programs, music, scouting, etc. Also list offices held, awards won and honors received.

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| --- | --- |
| **Extracurricular Activities** | **Positions, Awards, Honors** |
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**Work Experience**

|  |  |  |  |
| --- | --- | --- | --- |
| **Employer** | **Date of Employment** | **Position Held** | **Responsibilities** |
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**\*\*\*Do Not attach additional resumes, lists, etc. \*\*\***

**VIII. Financial Information**

Are you earning money from part-time work? Yes No

Have you received other scholarships? Yes No   
If yes, please list the name and amount of each.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Is there any person or persons dependent upon you? Yes No

**IX. Past Mason County Fair Participation**

List such things as projects exhibited, Junior Fair Board membership, workdays, clean-up projects, etc.

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**INTERVIEWS WILL BE CONDUCTED AT:**

**OHIO VALLEY BANK**

**328 Viand Street, Point Pleasant**

**July 17, 2025**

*(date is subject to change)*

* **YOU WILL BE CONTACTED TO SET UP YOUR APPOINTMENT**
* **THERE WILL BE NO MAKE UP INTERVIEW DATES**
* **INTERVIEWS MUST BE CONDUCTED IN PERSON**
* **YOUR APPLICATION WILL BE VOID IF NO INTERVIEW IS CONDUCTED**

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**To Be Completed by Student**

**CERTIFICATION**

I certify that all the information on these forms is true and correct to the best of my (our) knowledge. The Essay is my own work, and I received no assistance in writing it. If asked by any authorized representative of the Mason County Community FirstFair Scholarship Advisory Committee, I (we) agree to give documentation for information given on this form. I (we) realize that failure to comply with a request for further information may prevent the applicant from receiving any aid.

Applicant Signature Date

Parent/Guardian or (Spouse) Signature Date