

**Farmers & Merchants Bank Trust & Wealth Management Services**

**ADELINE LYNNE HAIS DVORAK SCHOLARSHIP APPLICATION**

**CLARENCE C. DVORAK SCHOLARSHIP APPLICATION**

**Scholarships are for students who are graduating or have graduated from a high school in Baxter County, Arkansas. The Adeline Lynne Hais Dvorak Scholarship is for students of German heritage. The Clarence C. Dvorak Scholarship is for students of Czech heritage. Students must possess good character and have a B average or better.**

**Please indicate which scholarship you are applying for:**

\_\_\_ Adeline Lynne Hais Dvorak Scholarship - Students of German heritage

\_\_\_ Clarence C. Dvorak Scholarship - Students of Czech heritage

**STUDENT INFORMATION**

Name: \_\_\_\_\_ SS#: \_\_\_\_\_

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

Home Phone #: \_\_\_\_\_ Work phone #: \_\_\_\_\_

Cell phone #: \_\_\_\_\_ Email address: \_\_\_\_\_

Year currently in school: \_\_\_\_\_ C = College; V = Vocational; H = High School & 1,2,3 or 4 for year;  
GS for graduate student

Name of Baxter County High School Attended \_\_\_\_\_

**Proof Required**

College or school expected to attend, or currently enrolled in:

\_\_\_\_\_

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

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

Major: \_\_\_\_\_ Expected date of graduation: \_\_\_\_\_

**FAMILY RELATIONSHIP**

Name of family member (ancestor) and relationship to student:

\_\_\_\_\_ (Required) relationship ex: father/mother, grandfather/grandmother, etc.

Country of origin: \_\_\_\_\_ (Required)

**THE FOLLOWING DOCUMENTS MUST BE INCLUDED WITH THE COMPLETED APPLICATION:**

- Current official high school transcript and ACT or SAT scores or current official college transcript and proof of graduation from a Baxter County, Arkansas, high school. No photocopies will be accepted.
- A signed letter by you providing information about yourself and your need for this scholarship.
- Two signed character reference letters from persons other than family members.

**The deadline is April 12<sup>th</sup>. Information mailed must be postmarked by the due date. If the deadline falls on a weekend or bank holiday, it will be extended to the next business day. Late or incomplete information will not be considered.**

**Signature is required.**

**If you have any questions, please call Farmers & Merchants Bank Trust & Wealth Management Services at 870-425-1801.**

Please send completed and signed application along with other required information to the following address:

For regular mail:

Farmers & Merchants Bank  
Dvorak Scholarship  
P.O. Box 1928  
Mountain Home, AR 72654-1928

For hand-delivered or overnight packages:

Farmers & Merchants Bank  
Dvorak Scholarship  
502 S. Hickory  
Mountain Home, AR 72653

By my signature on this application, I verify that the information in this scholarship application is accurate and is fair representation of my plans and situation. I agree to utilize any scholarship funds awarded me for educational purposes.

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Required)