MARVIN AND HILDA ROBBINS SCHOLARSHIP

SUBMIT HARD COPY OF APPLICATION BY JUNE 20, 2023 TO:

Two Rivers Bank & Trust
Attn: Trust Rivers Wealth Management – Pam Powell
P. O. Box 728
Burlington, IA 52601
Ph. 319-753-9132 www.tworivers.bank

For college school year 2023 / 2024

Name		
Date of Birth		
Address		
C-11 D1	II Dl	
Cell Phone	Home Phone	
E-mail		
High School Diploma from	1	Year
Located in:		
	(City, County, State)	
Undergraduat	e Degree from	
	lled in the graduate program at:	
University Na	ame	
Address		
Graduate degr	ree pursued (e.g., Masters)	
Field of Study	v(e.g., Business Admin.)	
Total years to	complete program	
Number of ye	ars completed	
Program is ac	credited by	

Total annual cost for tuition \$, fees \$, and books \$
How much of your college costs can other non-loan sources? \$		rants, work earnings, college savings programs and
What amount of student loans will yo	ou use to pay costs? \$	
What is your current student loan(s) b	palance? \$	
Amount your parents will contribute?	\$	
Do you work?		
If so, where?		
Approximate Monthly Gross Income	\$	
Marital status □ Single □ Married		
Do you have dependent children? □	Yes □ No If yes, nu	ımber
	cost of a college ed	duding personal or family circumstances. Avoid ucation. (This is your opportunity to tell us more following conditions:
	is information to pers	sons responsible for the selection of recipients of
	ust, Burlington, IA, a	rades to the and the scholarship selection committee; and if of any funds being distributed, the release required by
3. If I am awarded a scholarship and		
semester of study at the prescribed scholarship money. (Extenuating of		
	y the general rules of	zes that I have received the scholarship. f the selection committee applicable to all scholarship s at semester end.
Signature of applicant		
Date		