

# WESLEY H. AND BARBARA DUER SWILER MEMORIAL SCHOLARSHIP FOR COLLEGE SCHOOL YEAR 2026 - 2027

PLEASE RETURN COMPLETED APPLICATION BY MARCH 15, 2026 TO:

Please attach a  
picture here before  
returning completed  
application.

Two Rivers Bank and Trust  
Attn: Two Rivers Wealth Management  
P. O. Box 728  
Burlington, IA 52601

NAME \_\_\_\_\_  
Last First Middle

ADDRESS \_\_\_\_\_  
\_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ PHONE \_\_\_\_\_

EMAIL \_\_\_\_\_

I have been accepted ☐ I plan to enroll ☐

At \_\_\_\_\_

MAJOR IN COLLEGE \_\_\_\_\_ VOCATIONAL GOAL \_\_\_\_\_

ACT COMPOSITE SCORE \_\_\_\_\_ HIGH SCHOOL ATTENDING \_\_\_\_\_

CUM. GRADE POINT AVER. (Mid-Senior Yr.) \_\_\_\_\_ RANK IN CLASS \_\_\_\_\_ CLASS SIZE \_\_\_\_\_

NAMES OF PARENTS \_\_\_\_\_

FATHER'S PLACE OF EMPLOYMENT \_\_\_\_\_

MOTHER'S PLACE OF EMPLOYMENT \_\_\_\_\_

PARENTS' ADJUSTED GROSS INCOME ON IRS TAX RETURN \$ \_\_\_\_\_

OTHER SOURCES OF INCOME \$ \_\_\_\_\_  
(ie: Child Support, Social Security, Retirement, Exempt Interest Income, etc.)

NUMBER OF DEPENDENT CHILDREN LISTED ON INCOME TAX RETURN \_\_\_\_\_

NUMBER OF DEPENDENT CHILDREN IN COLLEGE NEXT YEAR, INCLUDING SELF \_\_\_\_\_

WHERE DO YOU WORK? \_\_\_\_\_

APPROXIMATE MONTHLY INCOME \$ \_\_\_\_\_

SCHOOL ACTIVITIES (organizations, athletics, dramatics, music, etc.) Name each activity, how many years you participated, and any offices held. Attach additional page(s), as needed.

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COMMUNITY ACTIVITIES (other than school activities) volunteer services, Scouts, church, etc. List positions of leadership, if any. Attach additional page(s), as necessary.

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Total annual cost for tuition, fees and books (do not include room and board). \$ \_\_\_\_\_

How much of your college costs will you be able to pay? \$ \_\_\_\_\_  
(Include grants, college savings programs, work earnings.)

How much will your parents contribute? \$ \_\_\_\_\_

1. **Attach a letter from a member of your school's faculty as a reference with respect to your character, work habits, and scholarship. Enter below the name and a phone number at which the faculty member is most accessible.**

Name: \_\_\_\_\_ Phone No. \_\_\_\_\_

2. **Attach a Transcript of Grades from your school.**
3. **Attach a single page on which you inform us about: (1) your motivation or inspiration for pursuing a college education and/or selecting your field of study, and (2) other information that would be helpful to the selection committee in its selection process, including personal or family circumstances. Avoid general comments about the high cost of a college education. (This is your opportunity to tell us more about yourself.) An application will not receive the selection committee's consideration unless this item is completed.**

1. Failure to provide all requested information may cause the application to be disregarded by the selection committee.
2. Permission is granted to release this information to persons responsible for the selection of recipients of scholarships.
3. My school is authorized to release a transcript of my grades to the trustee and the scholarship selection committee.
4. If I am awarded a scholarship and do not complete the first semester of study at the prescribed college, I agree to refund the scholarship money. (Extenuating circumstances may be reviewed by the committee.)
5. Permission is granted for a press release that includes my name and my award if I am a recipient.

Signature of applicant \_\_\_\_\_

Signature of parent/guardian \_\_\_\_\_

Date \_\_\_\_\_

Bank's Main Office Location:

Two Rivers Bank & Trust  
Two Rivers Wealth Management  
Attn: Michelle Huppenbauer  
222 N. Main Street  
Burlington, IA 52601

Phone: (319) 753-9165