

# JOHN B. AND BROWNIE YOUNG MEMORIAL SCHOLARSHIP PROGRAM

## Introduction

The John B. and Brownie Young Memorial Fund was established in 1961 by Gates F. Young to recognize deserving high school seniors graduating from high schools in the Owensboro, Daviess and McLean County public and parochial school districts. The principal purpose of the trust is to provide scholarships to students who otherwise might not be able to attend college. The scholarships are primarily intended for the first year of college, but scholarships may be and frequently are awarded for education beyond the freshman year.

BB&T Wealth Management acts as Trustee of the John B. and Brownie Young Memorial Fund. The trust is administered with the assistance of an Advisory Committee consisting of school representatives from each of the school districts whose students may receive scholarships from the trust.

## Eligibility

To be eligible for a Young Memorial Fund Scholarship, a student must be a high school senior in the Owensboro Independent, Daviess County, McLean County, or Owensboro Catholic Diocese school districts, rank in the top one-third of their class at the end of the fall semester of the senior year, **be unmarried**, and plan to attend an **accredited nonprofit college, university, or vocational/technical school** on a **full-time** basis (12 credit hours). **Students must remain unmarried during the award year (fall & spring college semesters) or the award (partially or totally) will be forfeited. Students must also remain a full-time student or the award will be forfeited.**

Eligible high school graduates who were unable to attend college immediately upon graduation because of health or financial reasons may apply at any time during the 24-month period following high school graduation. All students meeting the eligibility requirements are encouraged to apply regardless of their financial resources.

## Awards

Each student's scholarship award is made in an amount reasonably necessary to cover his or her unmet financial need. Accordingly, amounts awarded as scholarships can vary greatly. In determining the amount of the award, the Trustee and Advisory Committee consider all relevant factors, including but not limited to the estimated family contribution (EFC) as stated on the Student Aid Report (SAR), which is generated when the student files the FAFSA, the direct cost of attending the institution, and other financial aid a student will receive, including grants and other scholarships. Letters setting forth the amount of each scholarship award will be mailed to recipients in the summer.

## Application Procedure

Application packets will be delivered to the eligible students in February. **The deadline for returning the application to your Guidance Counselor is March 25th. DEADLINES WILL BE STRICTLY ENFORCED.** It is strongly recommended that each applicant file the Free Application for Federal Student Aid (FAFSA) early in the year in order to be considered for a scholarship amount greater than the minimum award. **Do not send FAFSA information, tax returns or W-2s to the school counselor since, for confidentiality reasons, we do not require that information to be kept on file. The FAFSA information will be provided to BB&T by the Financial Aid Office at the college.**

## Other Awards

You will be required to complete the "**Other Awards and Scholarship Form**". It must be received by BB&T Wealth Management at the address provided below by June 1st.

## Payment of Funds

Checks will be made payable to and mailed to the college or university. The checks will be issued the last week in July and the first week in December.

## Questions should be directed to:

Martha F. Clark  
1826 Lexington Avenue  
Owensboro, KY 42301  
Phone (270) 683-3272  
e-mail: [fittsclark@aol.com](mailto:fittsclark@aol.com)

Debra Barany  
BB&T Wealth Management Division  
230 Frederica Street  
Owensboro, KY 42301  
Phone (270) 688-7771 Fax (270) 688-7802  
e-mail: [dbarany@bbandt.com](mailto:dbarany@bbandt.com)

# Scholarship Application

C/O BB&T Wealth Management Division  
 230 Frederica Street  
 Owensboro, KY 42301

Complete all pages of this application as directed and return to your  
 High School Counselor before **March 25**.

First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_

Home Mailing Address \_\_\_\_\_ Apartment \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Cell Phone # (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Marital Status \_\_\_\_\_ Birth date (MM/DD/YY) \_\_\_\_\_ Home Phone # (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Social Security # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ E-Mail Address \_\_\_\_\_

I am a senior at \_\_\_\_\_ Year of High School Graduation \_\_\_\_\_

In the fall I plan to attend \_\_\_\_\_ with a major in \_\_\_\_\_

### CERTIFICATION

I certify, to the best of my knowledge, that the information on this application is complete and accurate. Falsification of any information will cause my disqualification from the scholarship competition. I understand that it is my responsibility to return this complete application to the Guidance Counselor at my high school by the deadline listed on the application. Furthermore, I understand that if my application is not complete, or if I do not submit my application by the deadline, I may be disqualified from the scholarship competition and will not be considered for the scholarship. This application, upon receipt, becomes the property of BB&T Wealth Management, the administrator of the scholarship.

As a recipient of the John B and Brownie Young Scholarship, I authorize BB&T to use my name, high school and college of choice in newspaper articles announcing the awards. No other personal information will be disclosed.

**Furthermore, to comply with the provisions of the Family Educational Rights and Privacy Act of 1974, I hereby give permission for school officials to release my secondary school record and other requested information.**

Applicant's  
 Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent's  
 Signature \_\_\_\_\_ Date \_\_\_\_\_

(If the student is under 18 years old)

**Guidance Counselor Instructions: (to be completed by Guidance Counselor)**

1. Include a copy of the student's transcript containing seven semesters of grades.
2. Fill in boxes below with the requested academic information & Sign Certification Statement below.
3. Once you have collected applications for all eligible students, please mail the entire packet to the address above postmarked by March 31.

High School GPA	High School Class Rank	High School Class Size	ACT Composite	SAT Math	SAT Verbal	

Counselor Name \_\_\_\_\_ School Phone \_\_\_\_\_ School Fax \_\_\_\_\_

I certify that all information on this application is correct and that a high school transcript if enclosed.

\_\_\_\_\_  
 Counselor Signature

\_\_\_\_\_  
 Date

BB&T Wealth Management  
230 Frederica Street  
Owensboro, KY 42301  
Phone (270) 688-7771 Fax (270) 688-7802

**John B. and Brownie Young Scholarship Fund  
Financial Aid Award Statement**

**Student and Parents: Please complete this side of this form. *The information on the back of this form is to be completed by the college financial aid office.***

Student's Full Name (print): \_\_\_\_\_ Soc. Sec. # \_\_\_\_\_

I authorize the Student Financial Aid Office at \_\_\_\_\_  
(college or university)  
to provide the information requested on the back of this page to:

John B & Brownie Young Scholarship Program  
C/O BB&T Wealth Management  
230 Frederica Street  
Owensboro, KY 42301

By this document, I hereby give representatives of the Student Financial Aid Office permission to discuss my academic records and my financial circumstances with representatives of BB&T Wealth Management. You should interpret this document as conforming to the provisions of the Family Educational Rights and Privacy Act of 1974.

Signature of Student \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent (if applicant is under 18 years of age) \_\_\_\_\_

Student Home Address \_\_\_\_\_ Apt \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_  
Home Phone (\_\_\_\_) \_\_\_\_\_

Date of Birth \_\_\_\_\_ High School \_\_\_\_\_

**Student Financial Aid Office:**

**IMPORTANT**

**Place a copy of this document in my file so that it will be available if calls are received from BB&T.**