

**THOMAS B. JONES AND GRACE STEVENSON JONES  
CHARITABLE FOUNDATION**

Administered by First Midwest Bank

230 West State Street, Sycamore, IL 60178

Application Access: [www.firstmidwest.com/wm\\_scholarships/](http://www.firstmidwest.com/wm_scholarships/)

**GENERAL INFORMATION**

The Thomas B. Jones and Grace Stevenson Jones Charitable Foundation awards academic scholarships to students from Grant, Iowa & Lafayette Counties, Wisconsin. Since 1989, the Foundation has awarded nearly \$2 million in scholarships to deserving students in order to assist them in pursuing higher education. These scholarship funds are administered by First Midwest Bank, a northern Illinois based bank with branches throughout Illinois, Indiana and Iowa.

**WHO IS ELIGIBLE?**

To be eligible for a Thomas B. Jones and Grace Stevenson Jones scholarship, you must:

1. Reside in Grant County, Iowa County or Lafayette County, Wisconsin;
2. Be enrolled in an accredited 4-year university or college at the time the scholarship award is paid (if you change schools following selection but before payments – in August and December – you must advise First Midwest Bank for a determination that the scholarship is transferrable to the new school);
3. Fully complete this Application (see instructions on Page 2 under “How Can I Apply?”); and
4. Submit the Application and all supporting materials no later than **MARCH 1, 2018**. It is your responsibility to ensure that not only your materials, but also any transcripts or letters of recommendation, are submitted in a timely manner. For this reason, please plan accordingly.

**PLEASE NOTE THAT LATE OR INCOMPLETE APPLICATIONS WILL BE  
AUTOMATICALLY DISQUALIFIED FROM CONSIDERATION**

All completed applications will be reviewed by the Thomas B. Jones and Grace Stevenson Jones Charitable Foundation Committee and all applicants will be informed of the decision of the Committee in late April – early May, 2018. **Note that the Jones Scholarship is a ONE YEAR scholarship for the following academic year – a new application must be submitted to be considered for the scholarship in subsequent years.**

**WHAT ARE THE CRITERIA FOR AWARDS?**

The Committee will base its judgment on the information submitted by the applicant who shall include at least one Letter of Recommendation from a person familiar with the applicant who can provide insight as to the **applicant’s ability to pursue school studies and achieve professional success after graduation**. Use the form (or copies of the form) attached to this application for all letters of recommendation.

Questions? Please contact: Todd E. Wallace,  
Assistant Vice-President and Wealth Management Officer  
First Midwest Bank  
todd.wallace@firstmidwest.com  
(779) 222-7026

## **HOW CAN I APPLY?**

**Visit [www.firstmidwest.com/wm\\_scholarships/](http://www.firstmidwest.com/wm_scholarships/) to download an application in PDF fillable format.**

- Applications are to be submitted for one academic year only. A student who has received a previous Thomas B. Jones and Grace Stevenson Jones scholarship must submit a renewal application for each succeeding year.
- The Application must be typed in the pdf writeable form and printed out or legibly handwritten. **Do not leave any items unanswered.** If a particular item does not apply to you, write N/A in the blank.
- If insufficient space is provided for an item, use a blank sheet of paper as a supplement, identifying each response by the section and item number and printing your name at the top.
- Make sure to include your name on **each and every page** of the application.
- Obtain the certification of the Dean's Office (Section IV of the application) for each school attended (high school and college). You must include official academic transcript(s) with the application which reflect GPA.
- Obtain one letter of recommendation from a person familiar with your **ability to pursue school studies and achieve professional success after graduation.** Use the form in Section V of the application.
- Ensure that you fill out and sign Section VI, Applicant Certification and Submission Checklist, and include this page with your submission.
- Applications and **ALL** required documentation must be submitted in person and/or postmarked **no later than March 1st** prior to the academic year for which aid is being requested.

**PLEASE BE MINDFUL THAT YOUR ABILITY TO CAREFULLY AND ACCURATELY COMPLETE THIS APPLICATION WILL BE CONSIDERED ALONG WITH YOUR QUALIFICATIONS BY THE COMMITTEE IN DETERMINING AN AWARD.**

Applicant Name: \_\_\_\_\_

**THOMAS B. JONES AND GRACE STEVENSON JONES CHARITABLE FOUNDATION**  
**SCHOLARSHIP APPLICATION**  
**C/O FIRST MIDWEST BANK**  
**230 W. STATE ST., SYCAMORE, IL 60178**

**I. PERSONAL INFORMATION:**

1. Name \_\_\_\_\_ 2. Age \_\_\_\_\_ 3. Date of Birth \_\_\_\_\_

4. Permanent Address \_\_\_\_\_

5. Address while in school \_\_\_\_\_

6. During what period have you resided in Grant, Iowa or Lafayette Counties, Wisconsin?  
\_\_\_\_\_

7. Phone Number \_\_\_\_\_ 8. Email \_\_\_\_\_

9. Sex: \_\_\_ Male \_\_\_ Female

**II. FAMILY INFORMATION:**

10. Father's Name \_\_\_\_\_ 11. Email \_\_\_\_\_

12. Address \_\_\_\_\_ 13. Phone \_\_\_\_\_

14. Mother's Name \_\_\_\_\_ 15. Email \_\_\_\_\_

16. Address \_\_\_\_\_ 17. Phone \_\_\_\_\_

18. Step-Parent's Name<sup>1</sup> \_\_\_\_\_ 19. Email \_\_\_\_\_

20. Address \_\_\_\_\_ 21. Phone \_\_\_\_\_

22. How many siblings do you have and what are their ages? \_\_\_\_\_

23. How many<sup>2</sup> will be attending college or graduate school during the 2018-2019 year? \_\_\_\_\_

24. What is your family's<sup>3</sup> total Adjusted Gross Income<sup>4</sup> for the following tax years?

2015: \$ \_\_\_\_\_ 2016: \$ \_\_\_\_\_ 2017<sup>5</sup>: \$ \_\_\_\_\_

\_\_\_\_\_

<sup>1</sup> If you live with them.

<sup>2</sup> Including you.

<sup>3</sup> Provide the total of Mother, Father and Step-Parent, if you live with them.

<sup>4</sup> 1040EZ Line 4, 1040A Line 21, 1040 Line 37.

<sup>5</sup> If not yet filing, provide estimate or mark "N/A".

Applicant Name: \_\_\_\_\_

**III. EDUCATION:**

25. Upcoming Year in School (2018-2019 academic year):

- \_\_\_\_\_ Freshman
- \_\_\_\_\_ Sophomore
- \_\_\_\_\_ Junior
- \_\_\_\_\_ Senior

26. High School Name: \_\_\_\_\_

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

Graduate Date (or expected): \_\_\_\_\_ GPA (4.0 Scale): \_\_\_\_\_

27. College Name: \_\_\_\_\_

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

Major/Program: \_\_\_\_\_

Expected Graduate Date: \_\_\_\_\_ GPA (4.0 Scale): \_\_\_\_\_

28. What are your total costs (tuition and fees) that you anticipate for the 2018-2019 academic year?

\_\_\_\_\_

29. Have you received the Jones Scholarship in the past? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, for which academic year(s)? \_\_\_\_\_

30. On a separate page, please provide a statement in essay form relating to the following questions:

- a. What are your plans for your education and professional career?
- b. What activities (academic, extracurricular, athletic, community service, jobs) have you been involved in during your educational career?
- c. Are there special challenges/circumstances in your life that the Committee should consider relating to your ability to attend and pay for college? (Examples may include illness, disability, divorce, incarceration, etc.)
- d. Is there anything else that the Committee should know about you?

Applicant Name: \_\_\_\_\_

**IV. SCHOOL CERTIFICATION** (to be completed by the applicable school official)

Name and Address of School: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Applicant's Address as it appears on school records: \_\_\_\_\_

Degree/certification sought: \_\_\_\_\_

Expected graduation date: \_\_\_\_\_

Grade Point Average: \_\_\_\_\_ Scale: \_\_\_\_\_ Class Rank: \_\_\_\_\_ out of \_\_\_\_\_

**\*\*Please attach academic transcript\*\***

Is the Applicant: A full time student? \_\_\_\_\_ Yes \_\_\_\_\_ No

Expected to complete program? \_\_\_\_\_ Yes \_\_\_\_\_ No

To the best of your knowledge, please describe the applicant's academic performance to date:

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

Summary ranking of academic performance: \_\_\_\_\_ Excellent  
\_\_\_\_\_ Good  
\_\_\_\_\_ Average  
\_\_\_\_\_ Poor

I certify that the Applicant whose name appears above is enrolled as stated in this certification and is in good standing. To the best of my knowledge, the statements herein are accurate and fairly represent the situation of the Applicant, who in my opinion qualifies for the scholarship being sought.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

*This Certification and requested documentation (i.e., academic transcript) may be provided to the Applicant for submission or mailed to:*

*Jones Scholarship Foundation, c/o First Midwest Bank, 230 W. State St., Sycamore, IL 60178.  
Questions may be directed to Todd E. Wallace, todd.wallace@firstmidwest.com, (779) 222-7026.*

Applicant Name: \_\_\_\_\_

**THOMAS B. JONES AND GRACE STEVENSON JONES SCHOLARSHIP**

V. **LETTER OF RECOMMENDATION** (to be completed by a person familiar with the Applicant's ability to pursue school studies and achieve professional success after graduation).

Applicant's Name: \_\_\_\_\_

Writer of Letter:

Thank you for agreeing to assist the Thomas B. Jones and Grace Stevenson Jones Scholarship Committee in their evaluation of the Applicant for an award to assist in the Applicant's pursuit of his/her education and career goals. Please provide a letter specifically indicating your opinion of the Applicant's ability to pursue school studies and achieve professional success after graduation. This letter should state how and for how long you have known the Applicant, and include examples of your observation of the Applicant's abilities in your experiences and interactions with the Applicant. Any pertinent information is valuable, but an evaluation of strengths and weaknesses within the context of **the Applicant's ability to pursue school studies and achieve professional success after graduation** is more helpful in the Committee's review than a recitation of routine praise of the Applicant.

Please note that this letter may be provided to the Applicant for submission or mailed to:

Jones Scholarship Foundation  
c/o First Midwest Bank  
230 W. State St.  
Sycamore, IL 60178

Please note that the deadline for submissions of applications and all supporting documentation is March 1, 2018. Please direct any questions to Todd E. Wallace, todd.wallace@firstmidwest.com, (779) 222-7026. Thank you.

Writer's Name: \_\_\_\_\_

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

Title/Position: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

**VI. APPLICANT CERTIFICATION AND SUBMISSION CHECKLIST:**

The undersigned represents and warrants that the information contained herein is true and correct. The Thomas B. Jones and Grace Stevenson Jones Scholarship Committee and First Midwest Bank, as Trustee, are authorized to verify the accuracy of this information and to procure any other information they may require.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Checklist for Submission:

	Enclosed	Will be submitted separately
1. Fully Completed Application:	_____	
2. Essay in Response to Question 30:	_____	
3. School Certification Form & transcript (high school):	_____	_____
4. School Certification Form & transcript (college <sup>6</sup> ):	_____	_____
5. Letter(s) of Recommendation:	_____	_____

ALL ABOVE APPLICATION MATERIALS MUST BE DELIVERED IN PERSON OR POSTMARKED BEFORE MARCH 1 PRIOR TO THE START OF THE ACADEMIC YEAR FOR WHICH AID IS BEING REQUESTED.

Mail or Deliver Submissions to:

Jones Scholarship Foundation  
c/o First Midwest Bank  
230 W. State St.  
Sycamore, IL 60178

Direct Inquiries to:

Todd E. Wallace, Assistant Vice-President & Wealth Management Officer  
todd.wallace@firstmidwest.com  
(779) 222-7026

<sup>6</sup> If applicable. If you have not yet attended college write "N/A".