Application for the Anna Marie Helbing Trust for Nursing Education

Applicant Name	Name of Parent(s), Guardian(s) or Spouse
Street Address	Street Address
City State Zip	City State Zip
CARBON County of Residence	Telephone Number
Date of Birth	Applicant Annual Income
	Parent(s), Guardian(s) or Spouse Annual Income

Highest Level of Education Completed

Nursing Degree you will be Pursuing

Name, Address and Phone Number of School you will be attending

List other Grant or Scholarship Applications you Completed and/or Received

How did you hear about us? ☐ Times News ☐ What's Happening ☐ School ☐ Other: _____

Additional Documentation Required

- Verification of Income for Applicant.
- Verification of Income for Parent, Guardian or Spouse.
- Copy of Current Grades OR Acceptance Letter to school you will be attending.
- Statement of why you are requesting this assistance. Please include need, leadership, academic background, personal commitment to nursing and community service.

Application may be mailed to:

Mauch Chunk Trust Company
Attn: Wealth Management Division
1202 North Street
P.O. Box 289
Jim Thorpe, PA 18229

Applications may also be dropped off at any branch of the Mauch Chunk Trust Company

Signature of Applicant Date

Signature of Parent, Guardian or Spouse

Application must be completed in every item. All additional information must be included. False Information may disqualify application. Awards will be made according to the terms established under the will of Anna Marie Helbing. All decisions of the committee will be binding and final.

Deadline for Completed Application is April 30th