

**VILLAGE OF COBDEN
R. G. WILLIAMS AWARD**

- Please type or print information.
- If there is not enough space to complete a response, attach separate sheet.
- Mail completed application to:

Village of Cobden
Scholarship Committee
P O Box 218
Cobden, IL 62920
(or submit to the Village Hall – 112 East Maple Street)

Applications must be received by the Village prior to 5:00 p.m., Friday, April 25, 2025.

Name:	_____		
Address:	_____		
	(Mailing address)		
	_____	_____	_____
	City	State	Zip Code
Telephone:	_____		
	Residential	Cell Phone	

PART I

1. Name the college, university, community college or vocational school you plan to attend.

First Choice: _____

Second Choice: _____

2. Intended major or field of study in college: _____

3. Family Income:

___ under \$15,000 ___ \$15,001 - \$55,000 ___ \$55,001 - \$75,000 ___ over \$75,000

Total number of family members living at home (including yourself): _____

Number of family members attending college: _____

Other financial considerations that need to be noted: _____

4. Extra-curricular activities, organizations, clubs, etc. (include any office held):

5. Honors and/or awards: _____

6. Volunteer service to community or Cobden School District. List any activities in which you were involved that contributed to the community or Cobden School District:

7. List hobbies or other interests: _____

8. In the space below, please describe in less than 100 words, why you feel you should be awarded this scholarship:

PART II

Letter of Recommendation – please attach a letter of recommendation.

PART III

By signing this application, we agree, if requested, to provide information that will verify the accuracy of this application. We also agree to allow the Village of Cobden to use our names/photographs in promotion materials, including, but not limited to, press releases, brochures and signage.

Student signature: _____ Date: _____

Parent/guardian name (printed or typed): _____

Parent/guardian signature: _____ Date: _____