

**BUTLER COUNTY SCHOLARSHIP
LILLIAN L. HECK FUND
NOMINATION FORM & CONFIDENTIAL STATEMENT**

The following information is strictly confidential and will be used only for Butler County Scholarship award purposes. Return it to the Guidance Office by Friday, April 24, 2026.

Part A: To be completed by Student and Parent(s)/Guardian

1. _____
Student's Last Name First M.I. Social Security # or College Student ID#

2. _____
Address _____
Street City/Town State Zip Code

3. CHECK ONE: _____Male _____Female _____Single _____Married _____Other

4. Parents/Guardian's Name

5. Applicant normally lives with _____Father _____Mother _____Both _____Other 6. High School

_____ Year of graduation _____

7. Name of School of Higher Education

8. Complete address of School

9. Status of applicant next September _____Fr. _____Soph. _____Jr. _____Sr.

10. Financial Statement (information should be completed based on the SAI provided by the FAFSA).

Please attach page one of your student aid report. Your SAI should be in the top right corner.

11. Please attach a copy of your acceptance letter from the post-secondary school you plan to attend or a statement from the Dean of the post-secondary school you are attending.

12. Certification: We declare the above information is true and correct to the best of our knowledge.

Signature of Applicant

Signature of Parent/Guardian

Part B: **To be completed by School Official**

1. Recommendation: Based on general deportment, good work habits, character, and self-help efforts, the above named student is recommended for the Lillian Heck, Butler County Scholarship. _____YES _____NO

2. Do they qualify for the scholarship based off their FAFSA EFC?
_____YES _____NO

Part C: **Action of Scholarship Committee**

_____Accepted _____Rejected Amount \$_____