

Carl "Gib" Gibble Memorial Scholarship

TO: Student Applicants
FROM: Board of Directors
RE: Application Process

On April 16, 1991, Carl "Gib" Gibble died after a lengthy battle with cancer. Gib was an outstanding athlete in Lebanon County and after high school graduation continued to actively participate in the Lebanon County Fast-Pitch Softball League. Because softball was one of Gib's many "loves," family and friends established a scholarship fund in his memory. The Carl "Gib" Gibble Memorial Scholarship Fund was established in May of 1991.

In Gib's honor we are offering this scholarship program to anyone pursuing higher education after high school graduation and meeting the following guidelines:

1. **If you are a member of the current graduating class of your high school.**
2. **If you are accepted for post-secondary study at an accredited institution.**
3. **Provide a copy of your official high school transcript with the application.**
4. **Provide a short essay about yourself. Describe in your own words your personal characteristics, accomplishments, primary interest, plans and goals. What sets you apart? (please no more than 250 words) Please DO NOT send letters of recommendation.**

Please send the application, essay, and transcript to:

**Deborah Lutz
3215 Tunnel Hill Rd
Lebanon, PA 17046-2655**

APPLICATIONS MUST BE POSTMARKED BY APRIL 2, 2021
NO LATE ACCEPTANCES

The Board of Directors will select scholarship recipients. Scholarship winners will be notified by mail to receive their check.

Thank you for applying for this scholarship. We wish you success in your future endeavors!

Carl "Gib" Gibble Memorial Scholarship Fund
Board of Directors

Enclosures

Carl "Gib" Gibble Memorial Scholarship
Student Application

Please print.

Name _____
(last name, first name and middle initial)

Home Address _____
(street, city, state, zip code)

Home Phone _____ Date of Birth _____

Cell Phone _____ (optional)

E-mail address _____

HIGH SCHOOL ATTENDING _____ Graduation Date _____

Name _____

Address _____
(street, city, state, zip code)

HIGHER EDUCATION INFORMATION

College _____ Major _____

Address _____
(street, city, state, zip code)

Will you be a full-time student? Yes _____ No _____

Accredited Yes _____ No _____ Student is Accepted _____ pending _____

Why have you chosen this school?

FATHER/GUARDIAN INFORMATION

Name _____ Phone _____

Home Address _____

Employer _____ Occupation _____

Employer's Address _____

MOTHER/GUARDIAN INFORMATION

Name _____ Phone _____

Home Address _____

Employer _____ Occupation _____

Employer Address _____

STUDENT INFORMATION

Have you been employed during the school year? Yes _____ No _____

Have you been employed during the summer? Yes _____ No _____

Employer _____ Occupation _____

Number of hours per week _____