A.A. "Shug" Banks served as Mississippi County Judge from January 1, 1961, through December 31, 1980. Judge Banks was on the original AAC Board of Directors starting in 1968. He served as President of the AAC Board of Directors from 1968 through 1980. Judge Banks was a key leader in the creation and advancement of the AAC and helped the CJAA improve during his service.

Commencing in the Summer of 2018, the Banks Family funded a college scholarship for financial assistance with an endowment of \$1,000 per year for five (5) years. The CJAA has matched that endowment with an additional \$1,000. The Banks Family and the CJAA continued the \$2,000 annual scholarship commencing in 2023 for another five (5) years, concluding in 2028. However, the intent going forward is to award the scholarship to a deserving student for their attendance at a community college or trade school. here are many deserving students in Arkansas that seek to develop a trade or vocation not dependent on obtaining a degree from a four-year college or university. The economy needs more welders, electricians, plumbers, mechanics, railroad workers, truckers, i.e., vocations other than those related to a four-year degree from a college or university.

## **QUALIFICATIONS FOR THOSE SEEKING SCHOLARSHIP:**

- Applicant must plan to attend or already attend a community college or trade school.
- Applicant must have a financial need.
- Applicant must have a current grade point average of 2.8 or above and a minimum ACT score of 18.
- Applicant must be or will be a graduate of a high school in the state of Arkansas.
- Applicant must be a child, grandchild, adopted child, or stepchild of current or retired county employee in Arkansas that worked in the county judge's office, road department, or other department under the county judge.

## INSTRUCTIONS FOR COMPLETING APPLICATION:

- Download the application at <u>www.arcounties.org</u>.
- Application is to be completed by applicant.
- All parts of the application must be completed in full.
- Please type or print in black or blue ink.
- Attach the following information to the completed application. Without the following information, application will not be processed:
  - 1. Three (3) character reference letters, one from a county employee other than a relative.
  - 2. An official transcript of courses taken along with ACT/SAT scores.
  - 3. A biographical statement, including family and educational background, financial need, work history and other pertinent information about yourself.

## SEND COMPLETED APPLICATION WITH ATTACHMENTS TO:

The Association of Arkansas Counties
Attn: CJAA Scholarship Fund
1415 West Third Street
Little Rock, Arkansas 72201

Completed applications must be received between January 1 and May 1, 2024, to be considered for award of the scholarship.



| Applicant's Name:  |  |
|--|--|
| Permanent Address:                                       |  |
| City, State, Zip:  |  |
|  | Number of Dependents:  |
|  | Currently Employed: YesNo  |
|  | ):   |
|  | Salary/Wages:  |
| Are you a child, grandchild, adopted child or            | stepchild of a current or retired county employee in Arkansas ad Department, or other Department under the County Judge? |
|  | e of Relative:   |
|  |  |
|  |  |
|  |  |
| Source and amount of funds available for year            | ar in which scholarship is requested (REQUIRED INFORMATION):   |
| Parents Projected Income                                 | \$   |
| Personal Projected Incom                                 | e \$   |
| Scholarships (Current or Antici                          | ,  |
| Government Grants  | \$   |
| Personal Savings   | \$   |
| Other (i.e. Spouse Income                                | 9) \$  |
|  | the Association of Arkansas Counties Scholarship Trust or No: nding:   |
| Institution Name:  |  |
| City, State, Zip:  | Major:   |
| Grade Point (on a 4.0 Scale):                            | Highest ACT or SAT Score:  |
| Academic Classification (Check One):  High School Senior | Community College Trade School   |
| Community College or Trade School in which               | Enrollment is Desired:   |
| Institution Name:  |  |
| City, State, Zip:  |  |
| Course of Study:   | Degree Sought:   |
| Expected Date of Completion:                             | Amount of Tuition/Fees Per Semester: \$  |
| Institution Name:  |  |

Signature:

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