**FIRST CONGREGATIONAL CHURCH**

**6105 Center Road Traverse City, MI 49686**

**info@fcctc.org**

**ACADEMIC SCHOLARSHIP APPLICATION (please submit by US mail or email)**

**SUBMISSION DEADLINE EXTENDED TO MAY 29, 2020**

**CONTACT INFORMATION**

**Name** (first, middle, last) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ADDRESS** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CITY/STATE**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **ZIP**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**EMAIL** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TELEPHONE**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **CELL NUMBER**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DATE OF BIRTH**\_\_\_\_\_\_\_\_\_\_\_\_\_ **CURRENT** **SCHOOL NAME** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PARENT/GUARDIAN NAME**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant must prepare a separate essay to accompany this application which includes the following information:

1. Involvement in church life and activities, past and present (include name of church if not First Congregational Church)
2. Brief outline of in-school and extracurricular activities, employment, community service, etc.
3. Educational goals and objectives
4. Any special circumstances the Scholarship Committee should know as they make a decision concerning your application

**Requirements for application consideration:**

* Applicant shall be a member of FCC for at least 2 years. (Extenuating circumstances may be considered)
* Applicant must be accepted for enrollment in a college, graduate school, nursing program, vocational school, or other institution of higher learning. **A photocopy of the letter of acceptance from that institution must be submitted with this application.**
* A current transcript or record of enrollment and grades for the most recent year of formal education, either high school or college, must be included with this application or mailed to FCC from the academic institution.
* Any scholarship funds must be used for the school year awarded or returned to FCC.
* Scholarship recipients may reapply in successive years.

**REFERENCES: AT LEAST ONE REFERENCE FROM A FCC MEMBER:**

1. Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I affirm that the information on this application is true and complete to the best of my knowledge. The Scholarship Committee will treat all scholarship application information confidentially.

**Applicant Signature**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent/Guardian)** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(for all minor applicants)