

# **United Church of Christ, First Congregational, Norwich NY**

## **Qualifications for Scholarships**

### **General Information**

The candidate(s) will be picked by the Memorial Gifts Committee.

Money can be used for any post-secondary education.

Applications are available from the church office.

Applications with references should be returned to the church office.

If you qualify, both scholarships may be applied for.

### **Memorial Gifts Scholarship**

This scholarship is given in memory of many devoted church members.

The award will be made on character, service, scholarship and financial consideration.

The scholarship will not necessarily be given yearly.

A total of \$1,000 is available for this scholarship.

#### Applicant Qualifications:

1. Graduating Senior
2. Member of United Church of Christ, First Congregational, Norwich, NY
3. Accepted for admission at a school of his or her choice by July 1<sup>st</sup>

### **Church Scholarship**

No more than \$1,000 will be awarded to any one applicant.

#### Applicant Qualifications:

1. Must be enrolled in post-secondary education within one year.

**United Church of Christ, First Congregational**  
11 West Main Street, Norwich NY 13815

**Scholarship Application**  
**Deadline is April 15<sup>th</sup>.**

Church Scholarship       Memorial Gifts Scholarship       Both

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

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Are you a member of this church?       yes       no

Are your parents members of this church?       yes       no

What do you think you have gained from your association with this church?

College Students: In what ways are you involved in churches or religious organizations at college?

High School attended: \_\_\_\_\_ Year of graduation: \_\_\_\_\_

SAT percentile: Verbal \_\_\_\_\_ Math \_\_\_\_\_

[Note: for SAT percentiles, use the percentile figure listed on your report for National High School sample.]

ACT percentile: \_\_\_\_\_ English Score \_\_\_\_\_ Math Score \_\_\_\_\_

[For ACT percentiles, indicate the State Percentile Rank of your composite score. This is listed on your ACT Assessment Student Report.]

Cumulative academic average (3 ½ years if high school senior): \_\_\_\_\_

BOCES Program Completed: \_\_\_\_\_ Year Completed: \_\_\_\_\_

Cumulative academic average: \_\_\_\_\_

Adult Education Programs covered under scholarship guidelines: \_\_\_\_\_

Post Secondary School: \_\_\_\_\_ Years of Attendance: \_\_\_\_\_

Major: \_\_\_\_\_

Minor \_\_\_\_\_

Cumulative grade point average \_\_\_\_\_

**Scholarship Application – Page 2 of 3**  
**Deadline is April 15<sup>th</sup>.**

**Name:** \_\_\_\_\_

What are your plans for the next academic year?

Have you filed a FAF this year?  yes  no If yes, what is the family contribution determined from this form? \_\_\_\_\_

What are your total expected expenses for schooling next year?

What other financial aid (including loans, grants and work-study) are you receiving for next year?  
List items separately.

Are there any special financial considerations that the scholarship committee should be aware of?

Are you planning to work while attending school? Explain.

What jobs have you had in the past 5 years?

What do you hope to accomplish in college?

**Scholarship Application – Page 3 of 3**  
**Deadline is April 15<sup>th</sup>.**

**Name:** \_\_\_\_\_

In what extra-curricular activities have you participated?

In what community activities have you participated?

List other family members who are currently attending post-secondary school?

Name	School	Age
_____	_____	_____
_____	_____	_____
_____	_____	_____

List below any other siblings

Name	Age	Name	Age
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

References: Give one reference form to each of three (3) people as outlined on the reference form. References should be returned with the application by the deadline date.

Name	Address	Phone
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

**United Church of Christ, First Congregational**  
11 W. Main Street, Norwich NY 13815

**Scholarship Application**  
**Deadline is April 15<sup>th</sup>.**

**Personal Reference Form**

Three (3) references must be filed when applying for the UCC Scholarship. One must be written from a professional educator who is familiar with you and your chances for succeeding in college and in your chosen profession. The other two need to be written by people who know you, but may not be relatives or close personal friends.

Scholarship applicant \_\_\_\_\_ Date: \_\_\_\_\_

Name of reference \_\_\_\_\_

Address of reference \_\_\_\_\_

In what capacity do you or have you known the applicant?

How long have you known the applicant? \_\_\_\_\_

Please use the space below to make comments regarding the applicant's perseverance, trustworthiness, responsibility and ability to cooperate with others. Feel free to elaborate with any recommendation you feel is appropriate as to why this applicant should receive a scholarship.

Please return this form to the applicant, in a sealed envelope if you prefer, to be returned with the application. Application deadline is April 15<sup>th</sup>.

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