

APPLICANT

(Please read carefully)

1. Candidate Eligibility

- A. Applicant must be a member of Converse Church of Christ for at least 2 years prior to receiving the scholarship.
- B. Applicant must have completed at least 2 years of full time study and be enrolled in the upcoming semester.
- C. Applicant must be available for an interview.
- D. You may contact the committee through, Kevin Summers, (ksum710@aol.com, 765-432-7090)

2. Scholarships

- A. Each scholarship awarded will be paid to the college of the recipient.
- B. The scholarships awarded will be determined by the application, the interview and the availability of funds.

3. Dates

A. 3-1-2020 Start application process

B. 3-29-2020 **Applications Due**

Return to: Converse Church Of Christ
Scholarship Committee
P.O. Box 413
Converse, IN 46919

C. Interview dates are set for:

May 16 (Saturday)

May 17 (Sunday Afternoon)

**If you know that you will not be available on these dates
please let me know ASAP, Kevin Summers**

2020-21
APPLICATION FOR CCC MEMORIAL SCHOLARSHIP

(To be completed by student)

Name _____

Address _____

Cell Phone # _____ Text ? Y or N Email _____
(primary contact will be by cell phone)

Student ID Number _____ Birth date _____ Marital Status _____

Where are you currently attending college? _____

Does your school offer Church matching grants? _____ If so when is the deadline? _____

What year of college will you be in this fall? Junior _____ Senior _____

Date you became a member of CCC through baptism or transfer of membership _____

What plans do you have for financing your education? (Work, parents, scholarships, loans, etc.)

What is your intended field of work? _____

How do you feel your field of work will enable you to continue serving the Lord?

List your activities and areas of involvement at Converse Church of Christ and/or a local congregation that you may be attending while at college.

Why do you think the Committee should choose you? _____

Note: A PERSONAL INTERVIEW MAY BE CONDUCTED.

Return this page to the church office upon completion.

DUE: 3-29-2020

INCOMPLETE APPLICATIONS MAY BE REJECTED

Applicant: Please provide the committee with 3 references

With at least one being ministry related (small group leader, bible study leader, etc.)

Applicant Name: _____

Reference Name: _____

Address: _____

Phone: _____

Relationship to Applicant (coach, teacher, etc.): _____

How long have you known this person: _____

Reference Name: _____

Address: _____

Phone: _____

Relationship to Applicant (coach, teacher, etc.): _____

How long have you known this person: _____

Reference Name: _____

Address: _____

Phone: _____

Relationship to Applicant (coach, teacher, etc.): _____

How long have you known this person: _____

(Please complete and return this page with your completed application)

DUE: 3-29-2020