

**SOUTH BRITAIN CONGREGATIONAL CHURCH SCHOLARSHIP
FUND
2024 SCHOLARSHIP APPLICATION**

**APPLICATIONS AVAILABLE BEGINNING SUNDAY, MARCH 3, 2024
APPLICATION DEADLINE: IN THE CHURCH OFFICE BY SUNDAY, APRIL 7, 2024
LATE APPLICATIONS CANNOT BE CONSIDERED**

Who may apply:

Eligible recipients are persons actively affiliated with the South Britain Congregational Church who will be attending college, technical school or are pursuing educational programs for career enhancement or for career change. Personal or family financial statements are not required.

AWARDS WILL BE PRESENTED ON SUNDAY, MAY 13, 2024

- APPLICATIONS ARE TO BE PREPARED BY THE APPLICANT
- PLEASE SUBMIT A SNAPSHOT OR SMALL PHOTO WITH APPLICATION
- COMPLETED APPLICATIONS SHOULD BE PLACED IN A SEALED ENVELOPE AND LEFT WITH THE CHURCH SECRETARY OR WITH A MEMBER OF THE SCHOLARSHIP COMMITTEE
- THE SELECTION OF RECIPIENTS AND THE AMOUNT OF AWARDS IS AT THE SOLE DISCRETION OF THE SCHOLARSHIP COMMITTEE
- APPLICATIONS RECEIVED AFTER THE DEADLINE CANNOT BE CONSIDERED

Scholarship Committee Members:

Judy Pierpont

Margie Nichols

Joan Kubista

June Bennett, Chair

**SOUTH BRITAIN CONGREGATIONAL CHURCH
SCHOLARSHIP AND SPECIAL TALENT GRANTS APPLICATION
Scholarship Year: 2024**

NAME: _____

TEL. #: _____

ADDRESS: _____

TOWN: _____

ZIP: _____

SCHOOL YOU WILL
ATTEND: _____

YEAR (LEVEL) YOU WILL
BE ENTERING: _____

A. Why did you choose this particular college/university: _____

B. Anticipated or actual area of study: _____

C. Degree or Certificate sought: _____

D. Anticipated Occupation: _____

FILL IN APPROPRIATE INFORMATION

LIST THE CHURCH ACTIVITIES IN WHICH YOU HAVE PARTICIPATED: _____

LIST COMMUNITY AND/OR SCHOOL ORGANIZATIONS IN WHICH YOU HAVE BEEN
ACTIVE AND INDICATE OFFICES HELD: _____

LIST ANY AWARDS OR HONORS YOU MAY HAVE RECEIVED: _____

PRINCIPAL HOBBIES AND INTERESTS: _____

HOW HAS YOUR CHURCH PARTICIPATION BEEN OF BENEFIT TO YOU: _____

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ANNUAL COST FOR TUITION: _____

ANNUAL COST FOR ROOM AND BOARD _____

AMOUNT OF GRANTS AND SCHOLARSHIPS RECEIVED: (_____)

NET COST: _____

LIST ANY EMPLOYMENT YOU HAVE HAD OR VOLUNTEER WORK DONE – include full, part-time or summer work:

<u>EMPLOYER</u>	<u>POSITION</u>	<u>LENGTH OF EMPLOYMENT</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

WHAT ARE YOUR JOB PLANS FOR THIS COMING YEAR, IF ANY

If you have brothers, sisters, spouse or children who are now attending college or other institutions of higher learning, please complete the following:

<u>NAME</u>	<u>RELATIONSHIP</u>	<u>COLLEGE/SCHOOL</u>	<u>ANTICIPATED DATE OF COMPLETION</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I understand that any money received will be returned to the Scholarship Fund if I do not attend School for the specified time.

SIGNATURE: _____ DATE: _____