

CENTRAL CHURCH OF CHRIST SCHOLARSHIP PROGRAM - Application

			Applicant	Informa	tion				
Full Name:							Date:		
A 1.1	Last		First				M.I.		
Address:	Street Address					,	Apartment/Unit #		
Phone:	City (E-mail Addı	ress:		,	State	ZIP Code	_
Aro vou ourr	ontly onrolled in	collogo? If							
Are you currently enrolled in college? If so, what is your status (Fresh, Soph. etc.):			Student ID Number:						
Name/Address/Phone Number of a Financial Aid Contact at current college:									
Are you a Hi	YES NO If yes, are you scheduled to graduate before the end of June of the current year?						NO		
Have you ever applied for this scholarship before? Have you received any other financial award or grant? What is your Proposed Major:			YES NO If yes, when? YES NO Name And Type:						
Have you been accepted? If so, when will you begin classes?									
Education									
				out. On					
High School	:		Address Did yo		YES	NO			
From: College (if		То:	graduate	?			Degree:		
Applicable: From:		To:	Address Did yo graduate	u	YES	NO	Degree:		
Trade School/Othe	er:		Address			NO	-		
From:		То:	Did yo graduate		YES	NO	Degree:		

List academic honors or any special recognition received in high school or college:



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Essav:

Please attach a separate essay expressing how your current course of study relates to the fulfillment of your goals as a Christian? How will you use your education to Glorify the Lord and/or further the work of the Church?

Church Information									
Church Membership:									
Are you active in any Church Activities/Ministries:	If Yes, please list Activities/Ministries:								
References									
Please list three personal references.									
Full Name:	Relationship:								
Organization:		Phone: ()							
Address:									
Full Name:	Relationship:								
Organization:		Phone: ()							
Address:									
Full Name:	Relationship:								
Organization:		Phone: ()							
Address:									
Employment or Military Service (if currently employed or enlisted)									
Company:		Phone: ()							
Address:	Su	pervisor:							
Job Title:	Starting Salary: \$	Ending Salary: \$							
Responsibilities:									
From: To:	Reason for Leaving:								
Will you be working while in school?	YES NO	Full or Part Time?							
	Disclaimer and Signature								
I certify that my answers are true and complete to the best of my knowledge. If this application leads to an award, I understand that false or misleading information in my application or interview may result in a cancellation of the award. Furthermore, I give the Scholarship Director permission to contact my school to verify the information provided in this application and to request any additional information needed.									
Signature:		Date:							



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Important Notes:

Submit your scholarship application online at www.ccocmd.org or by email at ccocscholarship@gmail.com.

The following documents should be included in your submission:

- Central Church of Christ Scholarship Program Application
- Central Church of Christ Scholarship Program Application Essay
- A copy of your most recent <u>grade report</u> or <u>transcript</u> (minimum of 3.0 CUM GPA)
- A copy of your acceptance letter(s) if you have been accepted to college
- At least one Letter of Recommendation (more than one not required but helpful)
- A 3x5 photo of yourself

Confidential Page 3 Deadline: First Sunday in May