

**Christian Service Fund Disbursement Committee Scholarship Application  
(First Year Application)  
United Church of Christ, Schleswig, Iowa**

**Personal/Contact Information**

Name:

Home Address:

Date of Birth:

Cell Phone:

Email:

Parents/Guardian Names:

High School:

**Employment Information**

Current Employer:

Employer Address:

Phone Number:

Years of Employment:

Position:

**Tell us about yourself: (School activities such as FFA, sports, etc. and number of years completed)**

**Church Activities: (Candlelighter, church work day, etc. and number of years participated)**

**Post High School Plans**

Name of school you plan to attend:

Have you been accepted?

Your anticipated Major:

Estimated cost of tuition per semester:

Estimated cost of school year, including books, room & board, etc:

What is the length of the program in semesters/years?

Please share with the Christian Service Fund Disbursement Committee why you have chosen the field in which you intend to major:

## How do you show your faith in your daily life?

### References

Please have references provided from **two** persons unrelated to you. One of these references should be from a United Church of Christ member (not a peer) and the other from your school principal, counselor or teacher. A reference form is provided. Please attach references to application or have references forwarded directly to church c/o CSFD.

### Transcript

Please submit an official high school transcript with your scholarship application.

### Final

The Christian Service Fund Disbursement Committee thanks you for taking the time to apply for the UCC Scholarship. We remind you that all information gathered for this application including transcript, references and interview will and shall remain confidential. If you do not complete the semester for which payment was made, you are **required** to return the full amount to the Christian Service Fund. Your signature on this application means that you have fully read the application and reference forms in their entirety. You also agree to keep your scholarship amount confidential and abide by the program as administered.

By signing this you confirm that you are a member of the Schleswig United Church of Christ.

### Signature

Name:

Date:

**\*\*Attach additional pages if necessary\*\***