## The First Presbyterian Church at Caldwell

## John R. and Inge P. Stafford Memorial Scholarship Application

## 2023

This application is due Wednesday, May 31st, 2023 in the church office by 12:00pm

Members of The First Presbyterian Church at Caldwell who are active in the life of the church	n,
or	
Young people active in the youth programs of the church.	
B. Eligible schools:	
Four-year accredited colleges	
Two-year accredited colleges	
Name:	
Address: Phone:	
City, State, Zip: E-Mail :	
High School: Year of Graduation	: GPA:
College:	ears Completed:
Degree:	GPA:

Name of the College/University you plan to attend:

Have you applied to the school? \_\_\_\_\_\_ Have you been accepted? \_\_\_\_\_

TYPE OR PRINT CLEARLY. IF YOU USE A COMPUTER, PLEASE INCLUDE EACH QUESTION WITH YOUR ANSWER.
1. Are you a member of the First Presbyterian Church at Caldwell?
2. Describe your involvement in the church's programs during the last 3 years—Sunday School, youth activities, choir, etc. Be specific about the extent of your involvement (inclusion of dates is required). Also describe your involvement in the church you now attend if you are away from FPC at present.
3. Describe any leadership roles you have held in school, church and/or the community.
4. Give three specific examples of how you demonstrate Christian service in your life.
5. What are your educational and long-term career goals? How does your faith in Christ fit into these?
6. List any other awards, scholarships, or special recognitions you have received.

7. Outline your financial plan for grants, or loans for which you ha			xpenses and inc	come, including other scholarships,
Expenses: (include Tuition, Room	n & Board, Books, Tr	ravel)		
Income: (include college savings,	employment incon	ne, other scholarsh	ips/loans)	
8. List scholarships, loans, or gra	nts by name, amour	nt, and whether th	ey are renewab	le.
Name & Amount				Renewable
				Yes/No
9. List employment (three most i	recent):			
Employer (Name of Co.)		Position	Dates	Supervisor/Phone #
a			<u>-</u>	
b				
c				
10. Provide names, addresses, ar recommendation or write a lette (Please ask permission when listi	r of recommendation	on for you. If you a		and not relatives, who could give and letters, please enclose copies.
Name/Relationship	Address			Phone

11. Please indicate any special circumstances of a personal nature that you would lil consider. All information is confidential.	ke the scholarship committee to
12. Attach a copy of your high school transcript.	
Please sign and date your application.	
Name	Date