

GREENSBORO UNITED CHURCH OF CHRIST
Greensboro, Vermont

Scholarship Fund Committee

We are pleased that you decided to further your education. Please take a moment to read the guidelines, then fill out an application form and send it to the Scholarship Committee, Greensboro United Church of Christ, P.O. Box 176, Greensboro, VT 05841. You may also find the guidelines and download or complete the form online at www.guccvt.org. Please note that the form is due by May 25. You will be informed if you received a scholarship and how much it is at graduation (Hazen Union) or by mail by the middle of June.

This scholarship is paid upon receipt of verification of your second semester enrollment (a copy of your second semester bill, or a letter of enrollment from the registrar's office). The check will be sent to your home address unless you ask that it be sent elsewhere. Payments will be made after the first of the year. You must request payment and send the verification to the above address by Feb. 15.

We hope we will be hearing from you.

The Scholarship Committee
Janet Travers chair, Sara Behrsing, Michael Metcalf

GREENSBORO UNITED CHURCH OF CHRIST
Greensboro, Vermont
Application for Scholarship Grant
DUE May 25

Name _____

Home Address _____ Phone _____

_____ Email _____

If you are living at home:

Father's Name _____ Occupation _____

Mother's Name _____ Occupation _____

Are you self supported? _____ Occupation: _____

List of schools attended:

High School(s) _____ Graduation year _____

College(s) _____ Graduation year _____

What has been your participation in school, church, and community activities?

Name of college or vocational/technical school you plan to attend:

Address: _____

Length of program _____ (semesters/years) Is the school accredited? _____

Briefly describe the course of study and your reasons for enrolling in the program.

Use separate sheet for additional space.

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Annual Costs:

Tuition _____ Room & Board _____ Books _____

Travel _____ Miscellaneous _____ **TOTAL:** _____

Funds available (Grants, Scholarships, Family, Work, Loans)

SOURCE OF FUNDS

AMOUNT

Describe any special circumstances which make scholarship aid imperative, ie: family illness, loss of income, etc.

I declare that the answers to the above questions are correct as far as I know. I understand that any grant awarded to me will be paid after the first of the year and following verification of my second semester enrollment.

SIGNED _____ DATE _____

MAIL TO:

Scholarship Committee
Greensboro United Church of Christ
P.O. Box 176
Greensboro, VT 05841

Due May 25