**College Student Scholarship Application**

**Ralph N. Hooks Scholarship Fund**

**First Christian Church**

**Abilene, Texas**

*This scholarship application is to be completed by a student with a minimum of one college semester completed.*

**DATE OF APPLICATION:**

The Ralph N. Hooks Scholarship Application must be submitted between April 1 and April 30.

\* Applications submitted after April 30 may not be processed.

\* All documents (i.e. application, letters of recommendation, transcripts) must be transmitted to

fccabilene@outlook.com in a pdf format.

\* The application form is not to be retyped or reformatted in any manner.

\* All photos must be transmitted in a jpg format.

" Do not mail or hand deliver your application.

\* First Christian Church should acknowledge receipt of your application within three (3) business days.

\* If you do not receive a receipt notification, please contact the church at 325-677-2186.

Provide an answer to every question on the application. If a question does not apply, answer with *Not Applicabl*e or *N/A*. An incomplete application may be rejected.

**Personal Information**

Name (first, middle, last):

Preferred Name:

Home Address (Street, City, State, and Zip Code):

Phones: Home: Cell: Work:

Email Address:

Do we have permission to contact you via phone, email, or text?

Date of Birth:

College ID Number:

**Home Church (Membership) Information**

Name of Texas Disciples of Christ Church where you are a member:

Church Address and Phone Number:

Name of Senior Pastor:

Senior Pastor’s Phone Number: Email Address:

Date you joined the church:

**Family Information**

Father’s Name and Home Address:

Father’s Phone: Home: Cell: Work:

Father’s Email Address:

Father’s Occupation and Employer:

Mother’s Name and Home Address:

Mother’s Phone: Home: Cell: Work:

Email Address:

Mother’s Occupation and Employer:

Do you reside with one or both of your parents?

***If applicable:***

Guardian’s Name and Home Address:

Guardian’s Phone: Home: Cell: Work:

Guardian’s Email Address:

Guardian’s Occupation and Employer:

Parent’s/guardian’s combined adjusted gross income from last year’s tax return:

How many siblings under the age of 18 currently reside in your house, not including yourself?

Number of siblings that will attend college next school year:

**Education**

High School attended at graduation and year of graduation:

Cumulative GPA (on 4.0 scale):

SAT scores: Math Reading/Writing Total

ACT Composite Score

College/University where currently enrolled:

Area of college study/major:

**High School Extracurricular Activities, Sports (indicate Varsity or JV), and Organizations**

Freshman Year

Sophomore Year

Junior Year

Senior Year

**College/University Extracurricular Activities, Sports (indicate Varsity or JV), and Organizations**

 Freshman Year

 Sophomore Year

 Junior Year

 Senior Year

**Community and Church service during high school and college years**

List organizations, duties, involvement, learned skills, and accomplishments.

**Employment History for the past three (3) years**

List employer, type of work, hours per week and employment dates.

If you were employed, indicate your adjusted gross income from last year’s tax return.

**Scholarships and Financial Aid**

If you will be receiving a full or partial scholarship based on merit, academics, or athletics in the upcoming academic year, what type of scholarship is it, and what is the amount of the scholarship award you will be receiving?

List other scholarships, grants, or any other types of financial assistance you have applied for or will be receiving for the upcoming academic year and state the amount of any award that may be received. Note with an asterisk any awarded, as of this time, and state the amount of the award.

Will you live in university-provided on-campus or off-campus housing for the upcoming academic year?

Will you participate in a university-provided meal plan in the upcoming academic year?

How do you plan to finance the remaining college expenses?

**Letters of Reference:**

List the names of two (2) adults (other than relatives) from whom you will request Letters of Reference. Each person should be one who knows your character and is willing to submit a reference on your behalf. The reference letters must include the name, address, phone number, and email address of the person submitting the letter. The letters must be emailed to First Christian Church at fccabilene@outlook.com and received no later than April 30.

**Personal Essay:**

In the space below these bullet points (or attached hereto as a separate document) write a 250-500 word essay that responds to the following points:

* Why do you want to go to college?
* How would receiving this scholarship award impact your ability to attend college?
* What are your career interests/goals, and what has motivated you toward these interests/goals?
* What are your life goals?
* Add information about yourself you feel is important and will assist the scholarship committee in knowing the person that you are and why you deserve the scholarship award.

**Transcripts:**

Attach OFFICIAL college transcripts. Unofficial copies will not be accepted. Transcripts must be complete through the most recent semester. It is your responsibility to furnish an OFFICIAL copy of your transcript after it has been updated with the end-of-the school academic year grades, even though you may have attached an incomplete transcript when you submitted this application.

**Certification Statement:**

I understand that by TYPING MY FULL NAME below that I am stating that all the information I have provided is accurate to the best of my knowledge, that I have not falsified or misrepresented any information contained in this application.

Typed name: Date application submitted:

**Personal Picture:**

Provide a recent picture of yourself with this application.