

**Application  
Immanuel Scholarships for Higher Education  
For Members of Immanuel U.C.C. – St. Bernard**

**APPLICATIONS MUST BE RECEIVED BY 7/29/18**

Immanuel UCC – St. Bernard  
Attn: Ministry & Outreach Committee  
210 Jefferson Ave  
St. Bernard, Ohio 45217

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Institution Attending: \_\_\_\_\_

- **FULL TIME – Fall 2018 – through Spring 2019:**  
Attach evidence of satisfactory completion of at least one quarter/semester or evidence of registration for the year 2018.
  
- **PART TIME – Fall 2018 – through Spring 2019:**  
Total # of credit hours you **expect** to complete for this period \_\_\_\_.  
Attach evidence of completion of courses for the first quarter/semester. You will receive funds for these courses when checks are distributed.  
  
As you complete additional courses, you may turn in evidence of completion to the Ministry & Outreach Committee.
  
- **SUMMER 2019 – Total # of Credit hours you **expect** to complete for this period \_\_\_\_**

**CHECK ONE BOX**

{ } I have read and understand the *Eligibility Requirements for the Immanuel UCC St. Bernard Scholarship Funds*.

**I have participated in the life of Immanuel UCC Services and /or events during 2018-2019.**

{ } *I have read and understand the Eligibility Requirements for the Immanuel UCC – St Bernard Scholarship Funds.*

**I have not met the eligibility requirements for the full allotment and understand that I will receive only half of the allotment for my status category.**

**SIGNATURE:**

**DATE:**

**BE SURE TO ATTACH ALL REQUIRED DOCUMENTS**