**The Adelphi Sunday School Class**

**Herbert Rohloff, Sr. Scholarship Application**

**First Methodist Church, Houston, TX**

Applications for the fall semester 2025 must be mailed by June 15, 2025. The scholarship grant is per semester/quarter. Late applications will not be considered.

Scholarship application process:

1. Please fill out the application below:
2. Please enclose (2) recent letters of recommendation that include the name and title of the writer.
3. Please enclose a certified official copy of your most recent high school or college transcript of courses taken and grades achieved.

Mail your application and enclosures to:

Adelphi Class Scholarship committee

c/o Sandi Miller

9339 Buffalo Speedway, Apt. 1330

Houston, TX 77025

Please provide the following information:

Full name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOB \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name and address of college you will attend: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Name, address, and phone of college financial aid office for scholarship funds: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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U.S, Citizen: Yes [ ] No [ ] If no, supply valid visa # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Marital status: Single [ ] Married [ ] Church affiliation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you or any relative a member of First Methodist Church Houston? Yes [ ] No [ ]

If yes: Name/relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Church activities in which you participate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Education: High School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year graduated: \_\_\_\_\_\_\_\_\_\_\_

College/Years attended: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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SAT score/year taken: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ACT score/year taken \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Briefly describe college/school activities in which you participate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Expenses – List expected school related expenses for the next semester/ half school year:

Tuition/Hours $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Book/Supplies $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Housing/Rent $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Meals $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Transportation $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other (describe) $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total expenses above: $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Income – List expected income from any source for the next semester:

Family $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Gifts/Scholarships $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Loans $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Job $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total income above: $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Provide a summary of your choice of study and why this scholarship is of importance to you:

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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In submitting this application, I state that the enclosed information is true and complete. If needed, I will supply additional information to the Adelphi Class scholarship committee. All funds awarded will be paid directly to the college/school on my behalf. If for any reason I do not enroll and attend classes, the received funds paid by Adelphi Class must be returned to the Adelphi Class scholarship fund.

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 Applicant printed name Signature Date