## **RENEWAL APPLICATION CHECKLIST**

## **The Story Family Scholarship**

Deadline: March 31, 2020

### NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Applying for

ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First Renewal Award \_\_\_\_\_

CITY-TOWN \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Zip\_\_\_\_\_\_\_\_\_\_ Second Renewal Award \_\_\_\_\_

Third Renewal Award \_\_\_\_\_

##### Telephone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#### CHECKLIST

\_\_\_\_\_\_\_\_ Complete application including written statement

\_\_\_\_\_\_\_\_ Official transcript indicating at least a “C” average

\_\_\_\_\_\_\_\_ Financial Information: Copies of most current filed tax returns of

parent(s)/guardian(s) AND applicant.

\_\_\_\_\_\_\_\_ Signature of parent or guardian

\_\_\_\_\_\_\_\_ Applicant’s signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_COMPLETE

# Applicants will be notified by May 5 of the committee’s decision.

Recipients should plan to be in attendance on Sunday, May 10 for the Scholarship Award Program.

# **RENEWAL Application – The Story Family Scholarship Fund**

## **Deadline – March 31**

**Please type or print clearly. Answer every question. Application must be signed. All requested materials, including previous semester transcript must be received before the application can be considered. This application is for one academic year. Final approval of renewal will be determined upon receipt of final transcript reflecting a grade point average of “C” or above.**

FULL NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_MALE\_\_\_\_ FEMALE\_\_\_\_

HOME ADDRESS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State\_\_\_\_\_\_Zip\_\_\_\_\_\_\_

HOME TELEPHONE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_SS#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PARENT(S)/GUARDIAN(S) NAMES\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent(s)/Guardian(s) Occupation(s) FATHER\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MOTHER\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

GUARDIAN\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (IF APPLICABLE)

Number of brothers and sisters \_\_\_\_\_\_\_\_List Ages\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have brothers and sisters currently attending an institution of higher education? If yes, please list sibling name(s) and school name(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

SCHOOL NAME AND COMPLETE MAILING ADDRESS NOW

ATTENDING\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Current GPA \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you plan to attend the same school where you are now enrolled in the coming year? \_\_\_\_\_

If not, please explain and give name and address of the institution you plan to attend. \_\_\_\_\_\_\_\_

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

Have you been accepted for admission by this institution? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Classification this fall: Soph.\_\_\_\_Jr.\_\_\_\_\_Sr.\_\_\_\_\_ Other\_\_\_\_\_ (Please explain)

Will you be enrolled for the academic year full time? \_\_\_\_\_\_\_\_\_\_\_\_

When do you expect to graduate? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What is your (\* Required) \*ACADEMIC MAJOR\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_MINOR\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What is your Career Goal \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you a former recipient? \_\_\_\_\_\_\_\_\_ Year(s) received \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I hereby certify that all information included in this application is true to the best of my knowledge.

Applicant’s Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# **NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

# **FINANCIAL STATEMENT**

**ESTIMATE EXPENSES** **FINANCIAL RESOURCES AVAILABLE FOR YOU TO PURSUE YOUR EDUCATION**

TUITION \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student’s Funds In Hand \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FEES \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student’s Expected Savings \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

BOOKS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Annual Support from Parents \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

HOUSING \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ GRANTS, INCLUDING NC LEGISLATIVE

TUITION GRANTS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TOTAL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Scholarships \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work/Study \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other Income (Please explain \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

TOTAL RESOURCES \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If your expense is greater than your income, how do you plan to meet the difference?

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

What other grants and/or scholarships do you expect to receive?

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

Have you filed a Financial Aid Form (FAF) or Family Financial Statement (FFS)? \_\_\_\_\_\_\_\_\_\_\_\_\_

Have you worked this part year?\_\_\_\_\_ Where?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Total Amount Earned?\_\_\_\_\_\_\_

Have you requested financial aid from the institution you plan to attend? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Has any been granted? \_\_\_\_\_\_\_\_ EXPLAIN\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Will you be living on campus? \_\_\_\_\_\_\_ With Parents? \_\_\_\_\_\_\_ OTHER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### Do you have outstanding educational loans? \_\_\_\_\_\_AMOUNT\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PARENT(S)/GUARDIAN(S) SIGNATURE(S) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## APPLICANT’S SIGNATURE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Must be signed for application to be considered

#### NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#### PERSONAL STATEMENT

Please summarize your past year, including academic progress and participation in extracurricular activities.

If there has been a change in your career goal and/or major, please explain.

I hereby affirm that all information in this application is true to the best of my knowledge.

Signature of Applicant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Must be signed for application to be considered.**

Completed Application should be **HAND-DELIVERED NO LATER THAN MARCH 31**

to the church office

501 Church Street,

Gibsonville, N.C. 27249

**THE STORY SCHOLARSHIP COMMITTEE CHAIRPERSON**

**Carol Younger**

**100 Bent Tree Court,**

**Gibsonville, N.C. 27249**

**Phone: (336) 449-6910**

[**Cyounger001@triad.rr.com**](mailto:Cyounger001@triad.rr.com)

**Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Citizenship Profile**

1. Please list below your involvement in college and community activities.

Include clubs, athletics, offices held, awards received, honors, etc.

Name of Activity Description of Participation Year(s)

II. Please list below your involvement in church activities such as youth group, choir, teacher, Bible school, church camp, offices held, etc.

Name of Activity Description of Involvement Year(s)