



# First Church of the Brethren

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*"Anointed to Share Transformation in Christ Jesus"*

## HARRISBURG FIRST CHURCH OF THE BRETHREN (HFCOB)

### SCHOLARSHIP FUND APPLICATION – DUE BY MAY 1

Please complete electronically and return to a member of the Scholarship Fund Committee.

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_

DOB: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

INSTITUTION ATTENDING: \_\_\_\_\_

Attach Acceptance Letter to this application

AMOUNT OF MONEY REQUESTED: \_\_\_\_\_

COMPLETE THE FOLLOWING 3 ESSAYS AND ATTACH TO THIS APPLICATION:

1. What would this money help you accomplish?
2. What is your goal for the upcoming academic year?
3. Upon completion of your education, how do you plan to give back to your community?

By signing below, I give permission for a HFCOB Scholarship Fund Committee member to communicate about my financial aid package with the institution I plan to attend.

\_\_\_\_\_  
Signature