

Fountain Park GMC, Sheboygan, Wisconsin

**SCHOLARSHIP APPLICATION**

**Due Date: April 26, 2026**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Home Address \_\_\_\_\_ Zip \_\_\_\_\_

From what high school did you graduate? \_\_\_\_\_ City \_\_\_\_\_

What year did you graduate from high school? \_\_\_\_\_

What was your rank in your high school class? \_\_\_\_\_ out of \_\_\_\_\_ students.

List any academic awards or honors received either in high school or college. \_\_\_\_\_

What education have you had beyond high school? \_\_\_\_\_

What was your grade point average in your last year of college or high school? \_\_\_\_\_

What college or school do you plan to attend? \_\_\_\_\_

Do you plan to attend school  full-time or  part-time?

In what field do you plan to major? \_\_\_\_\_

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

List the jobs you have had and how long you held them. \_\_\_\_\_

Estimate your educational expenses for the coming year.

Tuition and fees \$ \_\_\_\_\_ (in excess of other scholarships, grants, tuition waivers or assistantships)

Living expenses \$ \_\_\_\_\_ Itemize \$ \_\_\_\_\_

Other expenses \$ \_\_\_\_\_ Itemize \$ \_\_\_\_\_

Total Expenses \$ \_\_\_\_\_

ALL APPLICANTS: How often do you attend worship? (at Fountain Park) \_\_\_\_\_

(at school) \_\_\_\_\_

Are you planning to go into specific Christian work?  Yes  No If yes, please explain.

List activities and areas of service within your church, community or school you have participated in. \_\_\_\_\_

**If awarded a scholarship you will be issued a check for the entire amount in July.**

**(Continued on back)**

**TRADITIONAL/DEPENDENT YOUTH fill out this section** (claimed by parents on current year's tax form)

What amount of money do you expect to have earned for your education by the time school starts? \$ \_\_\_\_\_

Father's name \_\_\_\_\_ Place of employment \_\_\_\_\_

Mother's name \_\_\_\_\_ Place of employment \_\_\_\_\_

How many dependent brothers and sisters are living at home? \_\_\_\_\_

Are your parents active members at Fountain Park GMC? Yes No

If no, are they active members at another church? Yes No Please identify. \_\_\_\_\_

\*\* Please include an acceptance letter or some other proof of enrollment, such as registration or class schedule for the Fall of 2026. \*\*

Please write a paragraph indicating any financial needs that may warrant additional support. This may include, but is not limited to, outstanding health care expenses, unemployment, dependants in college, low income, etc.

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Please write a paragraph on how you feel God is working in your life.

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Please write a paragraph on how the Christian Faith can be applied to your vocation.

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**Scholarship Awards will be presented on Sunday, May 17<sup>th</sup> during the 9:00am service.**

Signature \_\_\_\_\_ Date \_\_\_\_\_