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| Scholarship Renewal Form | | | | | |
| (For Trinity United Church of Christ Members Only) | | | | | |
|  | | | | | |
| Scholarship Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | **Winning Year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | |
|  | | | | | |
| **Please Print Clearly** | | | | | |
| Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |
| Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |
| City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | State: \_\_\_ | | Zip code:\_\_\_\_\_\_\_ | | Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |
|  | | | | | |
| College/University you attend: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |
| Activities, groups, and ministries you are affiliated with at Trinity: | | | | | |
| *Use Additional Paper if Necessary* | | | | | |
| Ministry  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | From \_\_\_\_\_\_ | To \_\_\_\_\_\_\_\_ | | Chair  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| Ministry  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | From \_\_\_\_\_\_ | To \_\_\_\_\_\_\_\_ | | Chair  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
|  | | | | | |
| Offices held in ministries at Trinity: | | | | | |
|  | | | | | |
| Title  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | From \_\_\_\_\_\_ | To \_\_\_\_\_\_\_\_ | | Chair | |
| Title  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | From \_\_\_\_\_\_ | To \_\_\_\_\_\_\_\_ | | Chair | |
| **Checklist** | | | | | |
| * **Copy of your current official transcript** | | | | | |
| * **Letter verifying participation in a ministry at Trinity for at least one year** | | | | | |
| * **Other requirements as specified on appropriate scholarship form** | | | | | |
| *Thank you! May God bless your efforts as you strive to “serve the Lord with gladness” being all that God created you to be!* | | | | | |
|  | | | | | |
| **In order to receive a scholarship from Trinity United Church of Christ, applicant or family representative must be present on Scholarship Sunday** | | | | | |
| **Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | **Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | |