

MARGATE COMMUNITY CHURCH
WISZNAT/LeFAVRE MEMORIAL SCHOLARSHIP
GRANT APPLICATION 2024
(Please print neatly)

Name _____ Email _____

Home Phone _____ Cell Phone _____

Address, city, state, zip _____

Parents' names _____

Year confirmed _____ Year joined MCC _____

Current high school/college _____ GPA _____ (attach transcript)

Proposed school/college _____

Current level of education and major _____

Awards and/or special achievements _____

If you have received a scholarship from MCC in the past, please indicate dates and amounts:

Personal interests: _____

• **APPLICANTS MUST ATTACH THE FOLLOWING:**

❖ **A personal essay (300-500 words) that describes:**

- Your long range plans
- Community and church involvement (how you have supported Margate Community Church this past year)
- Accomplishments or special awards
- Challenges you have faced
- How you responded to them

All elements must be covered. Essay must be applicant generated. Any use of online composition sites will eliminate the application.

- ❖ One letter of recommendation from a teacher, counselor, coach, minister, church member, etc. *(Letters from relatives are not acceptable.)*

- **Qualified applicants will be active members or child members (under 18) of the Margate Community Church for at least one year. All applicants will have applied for enrollment in an institution of continuing education and will provide proof of acceptance prior to award of scholarship. Applicants must be full-time students. Second year applicants must show evidence of maintaining a "C"/2.5 GPA. All applicants will personally appear for an interview before the Scholarship Committee. Applicants will be notified of their interview date and time, by mail, after submission of the completed application and attachments.**
- **Applicants must have completed their church activities service log page, accruing a minimum of 5 points, by June 30th, 2024. Recipients of scholarships are required to continue their service to the church when available, during school breaks. (Tasks could include: ushering, greeting, working the annual August Craft Show, decorating the church, participating on pb&j Sundays, helping at church dinners or pancake breakfasts, etc.)**
- **Scholarship checks of \$500 will be awarded on Sunday, August 11, 2024 during the morning service. Recipients are expected to be present. An additional \$500 check will be awarded for the second semester once a copy of the first semester transcript has been submitted. Scholarship checks must be deposited/cashed within 90 days of receipt.**

Applicant's signature _____ Date _____

Applicant's name _____

The following is a list of qualifications and items that **MUST** be submitted for a scholarship application to be considered. Every candidate must be able to check each line, or the candidate will be disqualified.

As a candidate for this church scholarship, I affirm the following:

- I have an academic average of "C" or better (2.5 on a 4.0 scale).
- I am a currently enrolled college student at an accredited college or university.
- I am submitting a completed scholarship application form (copies are acceptable).
- I have attached an official transcript and, if an incoming freshman, my letter of acceptance.
- I have composed the requested personal essay (300 - 500 words) and *it has been proofread* for typing errors, grammar, structure, organization, content and clarity.
- I have attached a letter of reference.
- I have attached a list of all my church, school and community extracurricular activities.
- I completed my church activities service log page, accruing a minimum of 5 points, by June 30th, 2024.
- My name appears on *ALL* attachments.
- I understand I must submit a copy of my first semester official transcript to receive my second \$500 check.

Your signature below signifies you have checked each line above and therefore affirm each statement. **Applications will not be reviewed unless *all* components of the checklist are attached/completed.**

APPLICATION DEADLINE: MONDAY, JULY 15, 2024

NO EXCEPTIONS

Applicant's signature _____ Date _____

Scholarship Committee Chairperson: Betty Nathanson.

Please call 822-5050 if you have any questions. **Return completed application packets to the church office or e-mail application and supporting documents to: margatecommunitychurch@gmail.com**