

**HOLLYWOOD HILLS UNITED METHODIST CHURCH
THE HARRIETT G. KAEBNICK SCHOLARSHIP**

_____ Date of Application

___ New Applicant

___ Returning Applicant

PERSONAL INFORMATION

Full name _____
Last First Middle

Date of birth ____/____/____

___ Male ___ Single
___ Female ___ Married

Local address _____
Street/Box number

City State Zip

Home phone _____ Cell phone _____

Email address _____

School address (if applicable); if unknown, notify church office when available.

Local contact person (parent, spouse, guardian) _____

Address _____
Street/Box number

City State Zip

Phone _____

EDUCATIONAL INFORMATION

College, University, or Vocational School to which you have been admitted (must be a regionally accredited institution) _____

4-year college/university 2-year college Graduate School Vocational School

Full-time (12+semester hours) Part-time (less than 12 semester hours)

Full-time graduate school (9+ semester hours) Part-time graduate school (less than 9 semester hours) The Scholarship Committee should be notified prior to any changes in the above educational information.

Academic classification (upcoming scholarship year)

Freshman Sophomore Junior Senior Graduate Other

Planned Graduation Date _____ Major _____

Cumulative GPA _____ A 2.0 GPA is required to avoid probation. Attach or mail the following to the church office in a sealed envelope labeled "The Kaebnick Scholarship:"

1. An official high school transcript (incoming freshmen) or the most recent college grade report (returning applicants)
2. Course registration form for the upcoming semester
3. Covenant Agreement
4. Recent photo

Final educational goal _____

ACADEMIC & EXTRACURRICULAR INFORMATION

List school-related activities and awards. (Attach separate sheet, if needed.) Returning applicants focus on the past year.

Will you be working during the school year? Yes No

If yes, state place _____

Anticipated hours per week _____

CHURCH MEMBERSHIP

Date you joined Hollywood Hills United Methodist Church _____
month/year

(Note: You must have been an active member for at least one year to be eligible.)

Are your parents (guardian) members of Hollywood Hills United Methodist Church? __ Yes __ No

List three active members of HHUMC (non-family) who will recommend you for this scholarship:

1. _____
2. _____
3. _____

ESSAY ON CHURCH AND COMMUNITY PARTICIPATION

Please attach on a separate sheet an essay that addresses the following items:

1. Describe your attendance and participation in our church and/or your campus church. Place emphasis on activities during the **past year**. Mention dates of events and extent of participation.
2. Describe your family's current involvement in our church,
3. Describe your participation in activities of the local community.
4. Describe any special circumstances that you feel the committee should consider.

I understand that the Kaebnick Scholarship Committee encourages me to be a loyal and participating member of this congregation and my campus congregation with "my prayers, my presence, my gifts, and my service."

I understand that, as an applicant for a Harriett G. Kaebnick Scholarship, I must schedule a yearly interview with the Scholarship Committee. Applicants should contact the chairman of the committee for an interview date.

My photo is attached. I agree that photos or movie clips in which my face is recognizable may be used for publicity unless I send the committee, in writing, a letter indicating that no photos or movie clips in which my face may be recognized may be used.

I certify that the information in this application is true and complete to the best of my knowledge and under standing.

Signature of applicant _____ Date _____

Church Contact Information

Address: Hollywood Hills United Methodist Church
400 N. 35th Avenue
Hollywood, Florida 33021

Telephone: 954-989-8304
Fax: 954-989-1526