

Hickory Nut Gorge  
Community Church  
Outreach, Inc.  
(dba Shepherd's Care)



*Shepherd's Care Education Committee  
Yoder Scholarship Fund  
c/o Shepherd's Care*

*P.O. Box 634, Lake Lure, N.C. 28746  
Scholarship Application Form – First Application  
Fall 2008 Application  
Application Deadline: August 10, 2008*

Please answer all the questions below, provide the attachments requested, sign and date the form on page 3, then mail it to the above address. All information is confidential. For more information, see the Education Committee page on the Shepherd's Care website at <http://www.shepherdscarehng.org>

Date \_\_\_\_\_ Name \_\_\_\_\_  
(Last) (First) (Middle) (Maiden)

Home Address \_\_\_\_\_ Telephone \_\_\_\_\_  
\_\_\_\_\_  
(City) (State) (Zip Code)

Place of Birth \_\_\_\_\_ Birth date \_\_\_\_\_ Gender \_\_\_\_\_

Marital Status \_\_\_\_\_ Number of Children \_\_\_\_\_ SSN \_\_\_\_\_

What high schools are you attending or have you attended?

High School \_\_\_\_\_ Class Rank \_\_\_\_\_  
(Name) (City)  
High School \_\_\_\_\_ Class Rank \_\_\_\_\_  
(Name) (City)  
High School \_\_\_\_\_ Class Rank \_\_\_\_\_  
(Name) (City)

What post-secondary schools are you attending or have you applied to?

School \_\_\_\_\_ Class Rank \_\_\_\_\_  
(Name) (City)  
School \_\_\_\_\_ Class Rank \_\_\_\_\_  
(Name) (City)  
School \_\_\_\_\_ Class Rank \_\_\_\_\_  
(Name) (City)

What school do you plan to attend next semester?

School \_\_\_\_\_  
(Name) (City)

Acceptance status? \_\_\_\_\_

Field of study? \_\_\_\_\_ Length of total course of study? \_\_\_\_\_

When do your classes start? \_\_\_\_\_

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What are your hobbies? \_\_\_\_\_

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List your extracurricular and community activities, membership in organizations,  
noteworthy accomplishments, etc. during your high school years \_\_\_\_\_

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What are your career goals? \_\_\_\_\_

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*Financial Data for Fall 2008*

**School Expenses**  
(Please give dollar amounts)

**Resources for Education**  
(Please give dollar amounts)

Tuition: \_\_\_\_\_

Personal: \_\_\_\_\_

Other Fees: \_\_\_\_\_

Parent/Guardian Assistance: \_\_\_\_\_

Books & Supplies: \_\_\_\_\_

Grants/Scholarships: \_\_\_\_\_

Room & Board: \_\_\_\_\_

Student Loans: \_\_\_\_\_

Transportation: \_\_\_\_\_

Other: \_\_\_\_\_

Other Living Costs: \_\_\_\_\_

Total Expenses: \_\_\_\_\_

Total Resources: \_\_\_\_\_

Grants, loans, or scholarships you have applied for: \_\_\_\_\_

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Which of these scholarships do you expect to be granted and in what amounts?

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List the jobs you have held during the past 2 years:

<b>Company</b>	<b>Amount earned</b>	<b>Type of work</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Attachments:** (required with application)

\_\_\_ Complete transcripts for your final high school or most recent college semester

If any recipient of a Paul and Margaret Yoder Fund Scholarship fails to complete the school term covered by the scholarship award, the Shepherd's Care Education Committee reserves the right to attempt the recovery in full or in part of any funds issued.

This Scholarship Fund does not discriminate against any person because of race, color, religion, sex, marital or parental status, or national origin.

**Applicant's signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature of parent or Guardian:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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Shepherd's Care Education Committee use only