

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



*Shepherd's Care Education Committee
Paul and Margaret Yoder Scholarship Fund*

P.O. Box 634, Lake Lure, N.C. 28746

*Scholarship Application Form – Renewal
Fall Semester 2008*

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 _____

High School _____ Class Rank _____
(Name) (City)

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

What school do you plan to attend next semester? _____

Acceptance status? _____

Field of study? _____ Length of total course of study? _____

When do your classes start? _____

What are your hobbies? _____

List your extracurricular and community activities, membership in organizations,

noteworthy accomplishments, etc. during the past semester _____

What are your career goals? _____

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: _____

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

List the jobs you have held during the past semester:

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Company	Amount earned	Type of work
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Attachments: (required with application)

___ Complete transcripts for the Spring 2008 Semester

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

This Scholarship Program 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:** _____

Shepherd's Care Education Committee use only