Scholarship Deadline: May 15th each year.

 Awarded: June of each year.

First Congregational Church / United Church of Christ

310 Bluff Ave Sheboygan, WI 53081

(920) 457-4818 [www.fccsheboygan.org](http://www.fccsheboygan.org)

Scholarship Application

for the Ray E. Hoffmann Memorial Scholarship

 Ray Hoffmann was a man with a keen wit and a compassionate, healing soul. He served the wider Sheboygan community as a psychotherapist and founder of a foster care agency that provided treatment for seriously disturbed children. A memorial scholarship has been established in his name to continue his work and ministry.

 The Memorial Gifts Committee of First Congregational Church invites you to apply for the Ray E. Hoffmann Memorial Scholarship (grants ranging from $500 - $2,000) to further your education. The grants will be given to selected students who are pursuing an advanced degree in social work, counseling or psychotherapy. The student needs have a connection to the wider Sheboygan community (reside or work in Sheboygan County, attend an educational institution in Sheboygan Co. or be a member of First Congregational Church UCC, Sheboygan). Please fill out this form completely and return it to the church by the scholarship deadline. This scholarship is awarded once a year. Recipients & applicants may reapply each year.

APPLICANT'S NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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TELEPHONE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The following are the approximate costs per year (including books, tuition, lodging before deducting scholarships, loans, grants received) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 Name of school Address of School

I am entering the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_semester of my \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ year in a

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ degree program. I have \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ more years to complete my program.

Birthdate \_\_\_\_\_\_\_\_\_\_\_\_\_

1. Are there any special family circumstances that affect your going to school?

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2. Please list any additional scholarships and/or grants you will be receiving.

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3. List significant activities in school and offices held.

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4. List significant job or volunteer work experiences.

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5. My last academic experience was \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 My grade point average was \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Attach a copy of grade report/transcript)

6. Please attach a one-page answer to this question, "How would the Ray E. Hoffmann Scholarship help you to attain your educational/career goals?"

7. Please have one or two letter(s) of recommendation from a non-family member (teacher, employer, pastor, etc.) sent to First Congregational Church - attention: Ray E. Hoffmann Scholarship

 Name, Address and Phone # of Person(s) Providing Recommendation:

 1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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AGREEMENT

In making this request I understand that the purpose of the Ray E. Hoffmann Memorial Scholarship is to provide financial assistance to a worthy person who wishes to further his/her education. I agree to use this grant to the best of my ability in the manner for which it was intended. I understand that a personal interview may be requested. I understand that the grant money may be given directly to the academic institution where I am enrolled.

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_