**COX, O’CONNELL, McNEILL MEMORIAL SCHOLARSHIP**

**APPLICATION**

**University, College, or Community College**

1. Personal Data:

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone\_\_\_\_\_\_\_\_\_\_\_\_\_\_ e-mail\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth\_\_\_\_\_\_\_\_ Are you a member of Shallow Well Church? \_\_\_\_\_\_

1. College Data:

Name of Institution\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approximate Credit Hours – Sem.1\_\_\_\_\_\_ Sem.2\_\_\_\_\_ Summer\_\_\_\_\_\_\_\_

Amount Requested for Academic Year $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ATTACH the follow information to this application:

* Documentation of amount of tuition, fees, and books
* Documentation of scholarships, awards, fellowships, and grants

1. Christian Character – Attach one letter of reference by a non-family member
2. Academic Record – Attach an up-to-date high school or college transcript
3. Activities – Attach a list of services to, activities in, and /or honors from church school, and community
4. Interview – If deemed necessary by Scholarship Committee

Eligible Recipients:

* Active Members (as defined in the Constitution and Standing Rule of Shallow Well Church
* Dependent children (natural or adopted) of active members
* Dependents living in the home of active members

Application must be submitted on or before June 1 of the year for which the scholarship is requested and presented to a member of the Scholarship Committee.