

TROTWOOD CHURCH OF THE BRETHREN SCHOLARSHIPS 2024

Requirements:

1. Check off which scholarship or scholarships you are applying for.
2. Completely fill out application form.
3. A transcript of courses, credits, and test scores must accompany your application.
4. A recommendation from a professional school staff person or a community person should be attached in front of transcript or sent to Trotwood Church of the Brethren.
5. Scholarships range from \$300 to \$2,000.
6. Return by **Friday, April 12, 2024** to: Trotwood Church of the Brethren Scholarships
208 East Main Street
Trotwood, Ohio 45426
7. Only winners will be notified.

Henry and Dorothy Croy Memorial Scholarship

Qualifications:

1. Open to any high school graduate from a Southern Ohio & Kentucky District Church of the Brethren family or an applicant with family ties to the sponsoring family.
2. Although attendance at Manchester University is not an absolute requirement, it will be given highest consideration.
3. Although consideration will be given to applicants from the Trotwood Church of the Brethren family, students from other Southern Ohio & Kentucky Districts Church of the Brethren are encouraged to apply.
4. This is not restricted to first year college students. Applicants may apply or re-apply for succeeding years.

Dr. Arthur J. and Mayno R. Denlinger Memorial Scholarship

Qualifications:

1. Open to any high school graduate from a Southern Ohio & Kentucky District Church of the Brethren family or an applicant with family ties to the sponsoring family.
2. Although attendance at Manchester University is not an absolute requirement, it will be given highest consideration.
3. Although consideration will be given to applicants from the Trotwood Church of the Brethren family, students from other Southern Ohio & Kentucky District Churches of the Brethren are encouraged to apply.
4. This is not restricted to first year college students. Applicants may apply or re-apply for succeeding years. Preference to re-apply students who have good academic record.

Loren S. Rhoades Scholarship

Qualifications:

1. This scholarship shall be open to any Trotwood-Madison High School graduate and students from the Trotwood Church of the Brethren family.

Trotwood Church of the Brethren Memorial Scholarship Fund

Qualifications:

1. This scholarship shall be open to any person from the Trotwood Church of the Brethren family.

The Joan Shank Memorial Scholarship

Qualifications:

1. This scholarship shall be open to any student from the Trotwood Church of the Brethren family, any student that is a relative of the sponsoring family, and students from Trotwood Madison High School.
2. This is not restricted to first year college students. Applicants may apply or re-apply for succeeding years.

Student Signature: _____ **Date:** _____

TROTWOOD CHURCH OF THE BRETHREN 2024 SCHOLARSHIP APPLICATION FORM

I) Name _____ Age _____ Telephone _____

Address _____ City _____ Zip _____

Parents/Guardian _____

II) Extra Curricular Activities, Leadership Roles, Service

A) School _____

B) Church and/or Community _____

C) Awards or Honors Received in High School _____

_____ Test scores: ACT _____ SAT V _____ M _____

III) Work Experience

A) Regularly employed? Yes or No If yes, hours per week? _____ Where? _____

B) Irregularly employed? Yes or No If yes, hours per week? _____ Where? _____

IV) Finances - Related Information

A) Have you received notice of any scholarship or financial aid money from your college or any other source? Yes or No If yes, give name and amount _____

B) College Choice(s) 1) _____ Accepted? Yes or No Major _____

2) _____ Accepted? Yes or No Major _____

C) Estimate Expenses: 1) Tuition and Fees \$ _____

2) Room and Board \$ _____

3) Books and Supplies \$ _____

4) Other \$ _____

Total Cost Estimate \$ _____

D) How many dependent children are in the family? _____

How many in the family will be attending college full time in 2024-2025? _____

E) Please explain briefly any unusual financial circumstances in your family the selection committee should be aware of. _____

V) State briefly your goals, future plans, and why you should be awarded the scholarship for which you are applying. Attach a sheet of paper to this form should you need more space. _____

VI) Administration of scholarship

- A) It is the wish of the donors that scholarship(s) be awarded without regard to race, sex, or religion, as determined in accordance with the procedures and practices established by the Trotwood Church of the Brethren Leadership Team.
- B) The amount of the award will vary according to the funds available for a specific scholarship, and in some cases according to the actual need of the applicant, when considered with all other financial aid. Estimated range for the scholarship in 2024 is \$300 to \$2,000.
- C) The scholarship check shall be made payable to the college, university, trade school, etc. on behalf of the recipient. The Scholarship is good for one year of date below. Only winners will be notified.

This application must include transcript and recommendations, and must be returned by **Friday, April 12, 2024** to the Trotwood Church of the Brethren office.

TROTWOOD CHURCH OF THE BRETHREN 2024 SCHOLARSHIP RECOMMENDATION FORM

(The student is to fill out the top two lines before handing to the Evaluator)

Student _____ Date _____

Evaluator _____ Position _____

The student above is applying for a scholarship administered by the Trotwood Church of the Brethren. As evaluator, your evaluation and comments will be helpful to the selection process and will be seen only by the selection committee. Please complete this form and return it to the applicant, sealed if you like, or return it to the Trotwood Church of the Brethren office at 208 East Main Street, Trotwood, Ohio 45426 by **Friday, April 12, 2024**.

	Excellent	Good	Fair	Comments
1) Accepts responsibility				
2) Assists others voluntarily				
3) Contributes to well being of the classroom				
4) Treats others with respect				
5) Demonstrates a desire to learn				
6) Attends school regularly				
7) Demonstrates a positive attitude				

Comments:

Please include the length of time you have known the student and in what capacity. Give some general comments on factors not considered above.

Evaluator's Signature _____ Date _____