

# **VIRGINIA AND DON PENZ MEMORIAL** **SCHOLARSHIP FORM**

**Application Dates: March 2, 2020 – April 6, 2020**

*Scholarships are offered by Peace United Church of Christ, Rochester, Minnesota*

**Attention: Please read carefully:**

- Scholarship awards will be based on financial need and academic record.
- Recipients need to be enrolled in a **Rochester, Minnesota High-School**.
- An official transcript of your high-school academic record must be included with this application. Please limit additional information to one page or less.
- **This application must be returned or postmarked by April 6, 2020** to Virginia & Don Penz Memorial Scholarship, Peace UCC, 1503 2<sup>nd</sup> Ave NE, Rochester, MN 55906.
- Notification of acceptance only will be made by May 4, 2020.
- Recipients of awards must provide the committee with the full name and address of the post secondary institution he or she will be attending. The scholarship check will be sent to the recipient, but will need to be endorsed by both the recipient and the institution.

## **A. Personal Information**

Name: \_\_\_\_\_  
(Last) (First) (Middle)

Address: \_\_\_\_\_  
(Street/Box #) (City/State) (Zip Code)

Telephone: \_\_\_\_\_

Gender: (circle one) Male Female Age: \_\_\_\_\_ Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year

Where do you intend to go to college?: \_\_\_\_\_

Have you been accepted? \_\_\_\_\_ What degree will you be working toward? \_\_\_\_\_

What field of work do you plan to pursue after graduation from college?  
\_\_\_\_\_

Please summarize your extra-curricular and volunteer activities (senior-high and later):

- School: \_\_\_\_\_ - Social: \_\_\_\_\_

- Church: \_\_\_\_\_ - Civic: \_\_\_\_\_

## **B. School Record**

School Attended: \_\_\_\_\_ Year of Graduation: \_\_\_\_\_

Have you attended high-school or college elsewhere?(circle one) Yes No

If Yes, please list name of school and length of attendance? \_\_\_\_\_

## B. Work Experience

Employer & Address	How long?	Type of Work	PT / FT ?
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

## C. Family History (if living at home)

Father's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Number of siblings: \_\_\_\_\_ Do any members of your family attend a post-high school institution?  
\_\_\_\_ Father \_\_\_\_ Mother Where? \_\_\_\_\_

\_\_\_\_ Sibling(s) Where? \_\_\_\_\_

If on your own, describe your family situation:

## D. Financial Data

Indicate Total Gross Income (both parents) as indicated on 1040 Tax Form: \$ \_\_\_\_\_

Anticipated expenses: (circle one) per semester per quarter  
Tuition / Fees \$ \_\_\_\_\_ Books \$ \_\_\_\_\_

Living Expenses \$ \_\_\_\_\_ Other \$ \_\_\_\_\_

How much will your family contribute? \$ \_\_\_\_\_ How much you will contribute? \$ \_\_\_\_\_

Have you been awarded any financial assistance (loans, grants, local scholarships, etc)? Yes No  
If Yes, how much? \$ \_\_\_\_\_

Indicate any unusual circumstances that may increase your need:

## E. Personal References (please provide three character references – not relatives):

Name	Address	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

_____	_____	_____	_____
signature of applicant	date	signature of parent(s)	date