

**THE MISSIONARY SOCIETY OF CONNECTICUT/
HISTORIC CONNECTICUT CONFERENCE, UCC**

MEMBER IN DISCERNMENT SCHOLARSHIP

**SCHOLARSHIP APPLICATION FOR
Academic Year – 2020/21**

DEADLINE: JULY 15, 2020



APPLICATION FOR MEMBER IN DISCERNMENT SCHOLARSHIP

Applicants must:

1. Be a Member in Discernment at the time of application with a SNE Conference CT Association
2. Be attending an accredited College or Seminary, or on a multiple path to ordination e.g. schools of ministry, or be enrolled in an accredited CPE program.
3. Submit a current official college/seminary/school of ministry/CPE program transcript or acceptance letter
4. If a previous recipient to the MID Scholarship, all documents and guidelines were followed

MSC Member In Discernment Scholarship

Return this application and required attachments to:

(Please Note: if all required materials are not in by due date, the application will not be accepted.)

Mail or Email TO:
Attention: Jill Ford
Connecticut Conference United Church of Christ
125 Sherman Street
Hartford, CT 06105
fordj@sneucc.org
860-761-7112
FAX (with cover sheet!): 860-231-8111

PART A: Personal Profile

1. Name (Last, First, Middle Initial)	
2. Permanent Address	
City, State, Zip	Email
3. Mailing Address at School	
4. Church Membership	5. Association where you are a Member in Discernment
6. Date Received as a Member in Discernment	7. Name of Seminary/School of Ministry/CPE Program
8a. Year in school you will be in the Fall: <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Other	8b. Number of Credit Hours _____ Completed Last Semester _____ Registered for Fall 2020
9. Expected Date of Graduation:	10. Have you had previous financial help from the Conference, Association, Church or another UCC source? What year(s)? Who? Amount?
11. Single, married, separated, divorced, partnered?	12. Do you have dependents? Age (s):
13. Are you currently employed? F/T or P/T?	14. If so, where?
15a. Do you expect to work during the coming school year?	15b. If so, where? F/T or P/T?
16. Will your spouse/partner be employed? F/T or P/T?	17. Have you been awarded other scholarships for this coming year? If yes, please complete item #40:
18. Have you applied for scholarship from other sources? (Check All that apply) <input type="checkbox"/> Home Church <input type="checkbox"/> Other Church <input type="checkbox"/> Association <input type="checkbox"/> Member in Discernment Association if different <input type="checkbox"/> Other:	
19. Which type of Ministry settings do you anticipate serving in?	

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Part B: Estimated Expenses Worksheet

Please indicate the estimated number of expenses for the twelve-month period, for which the scholarship is requested. All figures should be written in the far right column.

20. Tuition, Books and Fees	
21. Room and Board/ Rent/ Mortgage	
22. Food/Groceries	
23. Clothing	
24. Utilities, i.e. electricity, gas, fuel, water	
25. Contributions to church and charities	
26. Life Insurance	
27. Medical Insurance	
28. Medical costs not covered by insurance (include spouse/partner and children)	
29. Auto Expenses:	
a. Operating Costs	
b. Loan/Finance Payments	
c. Insurance	
d. Total Auto Expense	
30. Travel expenses other than auto	
31. Child Support/ Child care	
32. Recreation/ Vacation	
33. Other expenses: (Please list in the columns below)	
34. TOTAL ESTIMATED EXPENSES:	

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Part C: Estimated Income Worksheet (for school year 2020-21)

35. Balance on hand by June 30, 20120	\$
36. Estimated income for the 2020-21 school year	
37. Expected support from Family Sources	
38. Annual income of Spouse/ Partner	
39. Child Support	
40. Other Scholarships/ Grants (<i>include estimates if you don't know exact amounts, list sources below</i>)	
41. Income from Property and other Sources	
42. Loans (i.e. GSL, home, equity, etc., provide estimates if you don't know the exact amounts) (List sources below)	
Source Amount	
43. TOTAL ESTIMATED INCOME (not including any estimated grant from this application)	
44. TOTAL ESTIMATED EXPENSES (from line 34)	
45. DIFFERENCE (between lines 44 and 43) (Please indicate whether the difference is a "+" or a "-" figure)	
46. What is your current educational debt?	
47. Spouse's or partner's educational debt	
48. Please use the reverse of this sheet for our final question.	
(OVER)	

By signing below, you are hereby acknowledging that all statements and financial figures on this application are true and no information requested has been withheld. All information obtained during this application process will be held confidential.

I have included a copy of my college transcripts and / or acceptance letter YES / NO

Applicant's Signature

Date

X _____

48. Describe your plan for financing your seminary education/preparation for ministry and any special factors or circumstances:

Per the policies by the Connecticut Conference all scholarships are administered under the authority and direction of the Conference Board of Directors. If awarded, this scholarship will be distributed directly to the recipient's school, UNLESS such distribution will result in an offsetting reduction of other scholarships. If funds are not sent directly to schools, recipients will need to provide documentation that the funds were used for appropriate academic expenses.

Acknowledgment:

Applicant's Signature

Date

X _____

If awarded, check is to be made out to: School Name or Applicant (please circle)

If made out to Applicant, I understand additional documentation will need to be provided

Yes (please circle)

Address check is to be mailed to:

Attention to: _____

Address 1: _____

Address 2: _____

Town, State, Zip: _____