**Women’s Scholarship Application Package**

**2024**

**First Congregational Church of Pasadena, United Church of Christ**

**500 E. Colorado Blvd., Pasadena CA 91101**

**626-795-0696**

[**www.uccpasadena.org**](http://www.uccpasadena.org)

[fccpasadenascholarship*@gmail.com*](mailto:%20fccpasadenascholarship@gmail.com)

**First Congregational Church of Pasadena, United Church of Christ**

**500 E. Colorado Boulevard, Pasadena CA 91101**

**626-795-0696 Fax: 626-795-0698**

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*First Congregational Church of Pasadena, UCC, Pasadena Area Women's Scholarship* isavailable annually in the amount of **$4500 or more** for persons who identify as female or transfeminine (hereafter referred to as women) who are currently enrolled or planning to enroll for Fall 2024 at a college or trade/technical school. Our Church’s Core Values are: Nurturing Spirituality, Extravagant Welcome and Social Justice. Our Vision Statement expands upon that to embody God’s love for all by celebrating diversity in race, age, gender, sexual orientation and physical ability. We also work to serve the marginalized and educationally underserved in the greater Pasadena area. These values and vision will guide our selection process.

**Information:**

* $4500 or more awarded annually to women on the basis of need according to the discretion of the Scholarship Committee of the First Congregational Church of Pasadena, UCC. Recipients may be awarded the scholarship more than once.
* Members of First Congregational Church of Pasadena, UCC are not eligible.
* Awards will be given to assist in the education to any college, university, technical or trade institute student.
* Qualities to be given equal consideration by the Scholarship Committee are: goals, grades, financial need, college and/or community service, and proximity to achieving degree objectives.

**Application Deadlines, Requirements and Procedures:**

**INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED**

Applicants must be current residents of the city of Pasadena or adjoining communities OR be enrolled by Fall of 2024 in a Pasadena college, university, technical or trade institute. Applications can be filled out directly through the church website [https://www.uccpasadena.org](https://www.uccpasadena.org/womens-scholarship-application) or mailed directly to the church.

* Applications are to be completed and returned no later than **March 31, 2024 at 10:00 pm** either by mail or directly through our website.
* Women must include a copy of their most recent transcript, if it has been within 5 years, with their completed application (Unofficial copies are permissible.)
* Two (2) references are required. At least one reference should be able to address the applicant’s ability to perform successfully in an academic setting. **The applicant is responsible to ensure the references are received by the Committee by March 31, 2024. References must be submitted online at** <https://www.uccpasadena.org/womens-scholarship-application>,
* Finalists will be interviewed the weekend of **April 20-21, 2024**. Awards will be presented on Saturday, **May 4, 2024** at the Annual Women’s Scholarship Celebration to be held at 500 E. Colorado Blvd., Pasadena. Winners are expected to attend.
* Students are expected to enroll in at least nine [9] units per semester at the undergraduate level and at least six [6] units at the graduate or postgraduate level.
* Scholarship recipients are expected to enroll in an educational institution by the following academic term (Fall, 2024). Enrollment verification is required. If circumstances necessitate that you defer your enrollment to 2024 or beyond, you will forfeit your scholarship.
* Scholarship recipients will receive their scholarship check once they provide verification of enrollment.

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**of Christ**

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2024 WOMEN’S SCHOLARSHIP APPLICATION FORM

1. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Last, First, MI)

2. Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Street (Apt#) (City/State/Zip) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Tel No. (\_\_\_) \_\_\_\_\_-\_\_\_\_\_\_\_\_

4. Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Date of Birth: \_\_\_/\_\_\_\_/\_\_\_\_\_

6. Race/Ethnicity: (check all that apply)

o African-American/Black ο Asian/Asian-Pacific ο Hispanic/Latina

ο Native-American ο Prefer Not to State ο Non-Hispanic White

ο Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7. Educational Background and Goals

A. School currently attending or last attended:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

C. How many total college/trade school credit units have you earned?

ο 0-29 ο 30-59 ο 60+

D. When do you plan to graduate from college/trade school? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E. What college or institution will you be attending next year? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

F. What is your Academic Major or Vocational Goal? (select one or more)

o Arts and Humanities ο Health and Human Services ο Other (Please describe)

ο Business Administration ο Mathematics \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ο Education ο Physical/Natural Sciences

ο Engineering ο Technical/Trade

G. High School last attended? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Year of graduation? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

H. List awards, honors and/or recognitions:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I. List current college, church and/or other community service involvement:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8. Financial Statement (must be completed)

|  |  |  |
| --- | --- | --- |
| 1. Gross Household income   (check all that apply) | Student/Applicant  ο less than $10,350  ο $10,351 to $26,500  ο $25,501 to $44,150  ο $44,151 to $70,650  ο more than $70,650 | Others in Household  ο less than $14,750  ο $14,751 to $37,850 ο >$100,900  ο $37,851 to $63,010  ο $63,041 to $100,900 |
| B. Are you currently an FCC scholarship recipient? ο Yes ο No | | |

I certify that the information above is true, correct and complete to the best of my knowledge as of this date. I understand the Scholarship Committee Chair may duplicate this application and disseminate it among the committee members.

Applicant Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PLEASE PRINT NAMES AND CONTACT INFORMATION OF BOTH REFERENCES

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

Tel# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Tel#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Additional Requirements:**

1. Please submit a well-written **autobiography** with this application. Maximum 400 words. Include your educational and vocational goals.

NOTE: Your autobiographical statement is extremely important in the selection process.

1. Include a copy of your most recent transcripts with this application (unofficial transcripts are acceptable).
2. Please send all required documents (in one package) to the Scholarship Committee (if by mail) or through our website**.**
3. **2 References to be submitted separately.**

**CONFIDENTIAL REFERENCE**

**First Congregational Church of Pasadena, UCC, Pasadena Area Women's Scholarship**

Dear Evaluator,

The Scholarship Committee of the First Congregational Church of Pasadena, UCC depends on and appreciates your careful appraisal of the below-named applicant’s potential. Your judgment about this student’s potential in her desired major and career is especially important. Your recommendation should include as much information as possible. Please note any unusual circumstances, or pertinent information, in the comments section of this form. Thank you very much.

**1. Applicant’s Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tel# ( \_\_\_\_\_\_ ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City \_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_\_

**2. Evaluator’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Tel# ( \_\_\_\_\_\_ ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City \_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_\_\_

**3. Please attach a letter of recommendation***.* Your comments regarding the applicant’s scholarship, professional potential, personal characteristics, or other considerations will be most helpful.

All information is confidential.

**Submit directly:** <https://www.uccpasadena.org/womens-scholarship-application>

or by Mail to:

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Tel# ( \_\_\_\_\_\_ ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City \_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_\_

**2. Evaluator’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Tel# ( \_\_\_\_\_\_ ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City \_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_\_

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