

Ohio Christian University Scholarship

PERSONAL INFORMATION:

First Name _____

Middle Name _____

Last Name _____

Street Address

City, State, Zip Code

Phone Number

(____) _____

Parent Information:

First Name _____

Middle Name _____

Last Name _____

Street Address

City, State, Zip Code

Phone Number

(____) _____

Activities:

School Activities:

Church Involvement and Activities:

Community Involvement and Activities:

EDUCATION:

Name and Address of School - Degree/Diploma - Graduation Date

Your Accumulative Grade Point Average:

College Major:

Work History:

Please list Employer, years employed, and duties

Skills and Qualifications: Licenses, Skills, Training, Awards (sports, school, Girl/Boy Scouts, church, etc.)

I certify that information contained in this application is true and complete.

Signature _____

Date _____