

APPLICATION

PEGGY THIEL EDUCATION SCHOLARSHIP

of the
FIRST CHRISTIAN CHURCH (Disciples of Christ)

ELIGIBILITY

- A. Applicant is to be a high school senior, a current college student or a resident of the Paris community.
- B. Applicant can be from the community as well as First Christian Church, with preference given to church members
- C. This is an education scholarship to support and promote teaching. Applicants are to be working toward a degree in education with plans to teach, or on advance training.
- D. Applicant must be attending a recognized institution of higher learning.
- E. Award will be based on the information given in this application and the references provided by two (2) individuals.
- F. Applicant must return this form in a sealed envelope to: The Scholarship Committee, c/o First Christian Church, 201 S. Main St. Paris, Illinois by April 15. The recipient, as well as all applicants, will be chosen and notified by May 1.
- G. This is a one-year scholarship in the amount of \$750.00.

INFORMATION

- A. Name _____
- B. Address _____
- C. Date of Birth _____ Phone # _____
- D. Parent/Guardian names _____
- E. School currently attending/year _____
or current employment/how long? _____
- F. School/Institution you plan to attend _____
- G. Major/Minor/Training Sought _____

- H. Reasons for entering this program/training (Attach additional sheet if needed.)

- I. How do you envision using your education degree/training in your future life and work?
(Attach additional sheet if needed.)

J. What was your inspiration? Why have you chosen to go into teaching as your profession?

K. List any teaching experiences to date.

L. Explain any financial need and how this scholarship will aid you.

M. Please give us any further information about your future plans and dreams as a teacher.

N. Please list two (2) persons (not related to you), and their positions, who can recommend you for teaching/education. Then give each a recommendation form to send in.

1. _____
2. _____

I hereby certify that the information provided in this application is true and correct to the best of my knowledge and belief.

Signature _____ Date _____

PEGGY THIEL EDUCATION
SCHOLARSHIP

Recommendation Form

Applicant's Name _____

How long have you known the applicant? _____

In what capacity have you known the applicant? _____

How would you describe the applicant's teaching aptitude? _____

How do you feel the applicant will apply his/her education training as a benefit
to others? _____

How do you feel the applicant's proposed course of education training/study
will be appropriate and beneficial to the applicant? _____

Your Signature _____ Phone # _____

Address _____

Note: Please return in a sealed envelope by April 15th to: Scholarship
Committee, c/o First Christian Church, 201 S. Main, Paris, Illinois 61944.

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