



FRANK C. CLEVELAND SCHOLARSHIP APPLICATION

To be Completed by Applicant (please type or print)

PART A – Personal Information

NAME: _____
Last First Middle Initial

SEX: ___M___F ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

Cell#: (____) _____ - _____ Home# : (____) _____ - _____ Work# : (____) _____ - _____

APPLICANTS EMAIL ADDRESS: _____ SS#: _____ - _____ - _____

ARE YOU A MEMBER OF AN EUMBA CHURCH? YES NO IF SO, HOW LONG? YEARS _____ OR MONTHS _____

ARE YOU ACTIVE IN YOUR CHURCH YOUTH MINISTRY? YES NO IF SO, HOW LONG? YEARS _____ OR MONTHS _____

PART B – EDUCATIONAL DATA

HIGH SCHOOL INFORMATION

NAME OF HIGH SCHOOL _____

CITY: _____ STATE: _____

COUNTY: _____

HIGH SCHOOL GRADUATION DATE: _____

PART C– ENROLLMENT PLANS

COLLEGE OR UNIVERSITY: _____

ADDRESS: _____

PHONE#: (____) _____ - _____ CITY: _____

STATE: _____ COUNTY: _____

AREA OF STUDY MOST INTERESTED IN: _____

ANTICIPATED DATE OF GRADUATION: _____

ANTICIPATED START DATE OF THE ACADEMIC YEAR: _____



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VERIFICATION OF APPLICATION

By signing below, the student confirms that the information provided is accurate and that the essay was written by that same student. The student also asserts to his/her intent to continue to pursue opportunities at a college or university.

STUDENT SIGNATURE:

PARENT SIGNATURE:

PASTOR SIGNATURE:

***NOTE THESE ITEMS MUST BE RECEIVED WITH THE APPLICATION FORM**

- 1. Essay One Letter of Recommendation from the Pastor**
- 2. Application must be received by Sunday, August 4th, 2022**

