



APPLICATION FOR COLORADO ALUMNI SCHOLARSHIP

APPLICANTS ARE REQUIRED TO PROVIDE THE FOLLOWING

1. Completed application returned **NO LATER THAN MARCH 14, 2008**
2. Typed Essays
3. Completed Evaluation/Letter from Youth Pastor/Minister
4. Completed Evaluation/Letter from High School Teacher/Counselor
5. High School Transcript
6. Signature of Applicant

PERSONAL INFORMATION

Name: _____
(Last) (First) (MI).

Address: _____

City: _____ St: CO Zip: _____

Phone (Home): (_____) _____ -- _____

High School Name: _____

Church Name: _____

Mother/Guardian: _____

Father/ Guardian: _____

ESSAYS

Please write a response to each of the following questions and submit them with your application. Please write within the given parameters. Keep in mind that the answers to these questions will help the Colorado Scholarship committee award scholarships for Colorado students that will be attending Calvin in the Fall of 2008.

1. Briefly describe your relationship with Jesus Christ. (150-250 words)
2. Describe your activities/ involvement with your Church and/or community. (200 words)
3. Briefly describe your involvement in High School and include any honors and/or achievements that you have been awarded. (300- 400 words)
4. Why have you decided to attend Calvin College? How will your decision impact your future goals and aspirations? (300-500 words)

SUBMIT APPLICATION TO Carol Buikema, 1051 West Oxford Place, Englewood, CO 80110

SEE ATTACHED I. PASTOR EVALUATION & II. TEACHER/COUNSELOR EVALUATION

Signature of Applicant: _____ Date: _____



YOUTH PASTOR/MINISTER EVALUATION

APPLICANT'S NAME: _____

PERSONAL INFORMATION

Name: _____
(Last) (First)

Contact Information: _____
(E-mail/Phone #)

Church Name: _____

Position/ Title: _____

How Long You Have Known the Applicant? _____

COMMENTS

*Please take a few moments to comment to the following questions for the Colorado Alumni Scholarship committee. Your comments are extremely important as the committee will evaluate each comment in order to award the Colorado Chapter Calvin Alumni Scholarship to those students who exemplify the Christian values on which Calvin bases its foundation. Please return to Carol Buikema, 1051 West Oxford Place, Englewood, CO 80110 **NO LATER THAN MARCH 14, 2008.***

1. Briefly describe the applicant's personal character as you know it within the church and outside in the community? Describe the applicant's involvement/activities with the church community.
2. How would you describe the applicant's commitment to Jesus Christ?
3. Do you have any other comments about the applicant that you would like to share that will assist with the decision making process for the Scholarship committee?

Signature of
Youth Pastor/Minister: _____

Date: _____



TEACHER/ COUNSELOR EVALUATION

APPLICANTS NAME: _____

PERSONAL INFORMATION

Name: _____
(Last), (First)

Contact Information: _____
(E-mail/Phone #)

School Name: _____

Position/ Title: _____

RANKING EVALUATION

*Please rank the applicant in each of the defined categories. The rating scale is from 1-5 (a being the worst and 5 being the best). These rankings will inform the Scholarship committee about the applicant's academic history and potential. Please then type 1 -2 sentences about each category in order to define the rank further. Please return to Carol Buikema, 1051 West Oxford Place, Englewood, CO 80110 **NO LATER THAN MARCH 14, 2008.***

Student's Academics 1 2 3 4 5
Explain: _____

Student's Leadership Qualities 1 2 3 4 5
Explain: _____

Student's High School Accomplishments 1 2 3 4 5
Explain: _____

ADDITIONAL COMMENTS

1. Sincerity of Purpose and any comments the committee should evaluate about this applicant?

Teacher/Counselor Signature: _____ Date: _____