



**GUIDELINES FOR CLARA D. KOCH SCHOLARSHIP**  
**FOR CONTINUING APPLICANTS**  
**SHORT FORM**

The United Women in Faith (UWIF) of the Asbury United Methodist Church, 1533 Springhouse Road, Allentown, PA, 18104, are pleased to be able to offer the Clara D. Koch Scholarship to a person who meets the requirements outlined below.

**CRITERIA:**

1. Exhibits a definite financial need at this time.
2. Is a student in good academic standing while maintaining a minimum 2.0 GPA in an enrolled college/university and has a motivation for continued education.
3. Has qualities of leadership and good citizenship, and gives service to others.
4. Has been an active member and participated in the activities of either Asbury United Methodist Church, Casa del Rey United Methodist Church or St. James AME Zion Church all in Allentown PA.

Note: Financial need will be the main criteria for selection.

The application must be fully completed and returned to the church no later than Monday, April 15, 2024. Please use the following address for mailing:

UWIF Clara D. Koch Scholarship Committee  
Asbury United Methodist Church  
1533 Springhouse Road  
Allentown, PA 18104-2243

# CONTINUING SCHOLARSHIP APPLICATION

DATE: \_\_\_\_\_

The completed application must be received by the Scholarship Committee no later than Monday, April 15, 2024, along with a transcript of the applicant's grades.

## PERSONAL DATA

NAME: (Last)\_\_\_\_\_ (First)\_\_\_\_\_ (Middle) \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PERSONAL TELEPHONE: \_\_\_\_\_ And \_\_\_\_\_

EMAIL \_\_\_\_\_ (the one you regularly check)

NAME OF PARENTS(S) GUARDIAN(S) \_\_\_\_\_

ADDRESS: \_\_\_\_\_

COLLEGE YOU ATTEND: \_\_\_\_\_

DATE/ANTICIPATED DATE OF COLLEGE GRADUATION: \_\_\_\_\_

## FINANCIAL DATA

FATHER'S EMPLOYER:

(Name) \_\_\_\_\_

(Address) \_\_\_\_\_

(Phone No.) \_\_\_\_\_ Yearly Income: \_\_\_\_\_

MOTHER'S EMPLOYER:

(Name) \_\_\_\_\_

(Address) \_\_\_\_\_

(Phone No.) \_\_\_\_\_ Yearly Income: \_\_\_\_\_

ARE YOU EMPLOYED? IF SO, NAME AND ADDRESS OF EMPLOYER:

(Name) \_\_\_\_\_

(Address) \_\_\_\_\_

(Phone No.) \_\_\_\_\_ (Hours per week) \_\_\_\_\_ (Weekly Income) \_\_\_\_\_

HAVE YOU FILED THE FAFSA? \_\_\_\_\_ Yes \_\_\_\_\_ No

WHAT OTHER FINANCIAL AID HAVE YOU APPLIED FOR? \_\_\_\_\_

DO YOU HAVE A COLLEGE FUND ALREADY ESTABLISHED? \_\_\_\_\_ Yes \_\_\_\_\_ No

WILL YOU SUPPLEMENT YOUR EDUCATION THROUGH EMPLOYMENT IF:

a. You receive a scholarship? \_\_\_\_\_ Yes \_\_\_\_\_ No

b. You do not receive a scholarship? \_\_\_\_\_ Yes \_\_\_\_\_ No

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## EDUCATIONAL INSTITUTION

COLLEGE: \_\_\_\_\_

STUDENT ID NUMBER: \_\_\_\_\_

BURSAR'S ADDRESS

: \_\_\_\_\_

YEARLY EDUCATION COSTS: TUITION \_\_\_\_\_ HOUSING \_\_\_\_\_ BOOKS \_\_\_\_\_

DATE PAYMENT DUE \_\_\_\_\_ TERM BEGINS \_\_\_\_\_

WILL YOU? \_\_\_\_\_ COMMUTE \_\_\_\_\_ STAY ON CAMPUS \_\_\_\_\_ OTHER \_\_\_\_\_

ANTICIPATED COURSE OF STUDY: \_\_\_\_\_

TIME REQUIRED TO COMPLETE COURSE OF STUDY: \_\_\_\_\_

.....

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of parent/guardian

\_\_\_\_\_  
Date

Not required if no parental financial aid received or if student is enrolled in a graduate program.

This application must be received by Monday, April 15, 2024 along with the documents listed below in order to receive consideration.

\_\_\_\_\_ Transcript of grades and attendance from your college

(School may wish to send transcript directly to The Scholarship Committee – see address below. . Send to address below:

UWIF Clara D. Koch Scholarship Committee  
Asbury United Methodist Church  
1533 Springhouse Road  
Allentown, PA 18104-2243

Questions? Call Linda McCreight, Clara D. Koch Scholarship Chair, at 610-395-2261  
Or contact at [UWIFscholarship@asburylv.org](mailto:UWIFscholarship@asburylv.org).