Phil & Ione Himebaugh Memorial Scholarship First Presbyterian Church Monticello, Iowa

DESCRIPTION OF SCHOLARSHIP:

The amount of this scholarship will be determined by the revenue generated from the memorial money submitted, not to exceed \$300.00, and will be made only from such generated revenue so as to allow for a perpetual fund. This scholarship is intended to compensate the winner for tuition, books, and/or fees at an approved school. This scholarship is awarded in memory of Phil and Ione Himebaugh.

ELIGIBILITY:

A graduating high school senior and a member of First Presbyterian Church of Monticello, Iowa, may apply. The student must be intending to enroll at an approved school leading to a two-year or four-year degree.

CRITERIA FOR SELECTION:

The following shall be used in selecting the recipient:

- Need
- Character
- Participation in church activities
- Participation in school activities
- Participation in community activities
- Scholarship

This scholarship is intended to help that student who may not otherwise be able to attend a two-year or four-year degree program.

SELECTION COMMITTEE:

The members of the scholarship committee of First Presbyterian Church of Monticello, Iowa will make the selection of the recipient.

AWARD DATE:

Honors Night at the student's school. The recipients will also be introduced to the congregation of First Presbyterian Church of Monticello, Iowa on May 12, 2019 at the 10:00 a.m. church service.

PAYMENT OF AWARD:

A check shall be issued to the recipient sometime in mid-October.

Phil & Ione Himebaugh Memorial Scholarship for the 2019-2020 Academic Year

INSTRUCTIONS:

- 1. Type or computer process your application.
- 2. Return your application by **April 1, 2019.** It must be received by that date.
- 3. Attach a copy of your most recent transcript, obtained from your high school's guidance office.
- 4. Sign your application.
- 5. Send your application to:

First Presbyterian Church 211 West First Street Monticello, Iowa 52310

Name of Applicant
Home Address
Father's/Guardian's Full Name:
Mother's/Guardian's Full Name:
Number of brothers sisters
Please list three people (non-relatives) who could make a recommendation on your behalf. Include addresses.
Extra Curricular Activities
Community Activities
Church Participation/Involvement

ucational plans: Name of College	
Address	
Major/Program	
Start Date and Length of Program	
What are your current educational/vocational goals?	
Why are you deserving of this scholarship?	
Applicant Signature	Date:
Parent/Guardian Signature	Date: