

Personal Information First Presbyterian Church of Haddonfield Board of Deacons Scholarship Application



Full Name	Date of birth	
Address		
City	Zip Code	
Applicant cell phone numbe	er:	
Applicant e-mail address: _		
Parent/Guardian cell phone	e number:	-
Parent/Guardian e-mail add	dress:	_
Present School & Graduati	on Date	_
College you will be attendir	ng in the fall of 2022:	
Church Experience		
Were you confirmed?		
If so, where and w	hat year?	
Please list Church activities space below:	s with which you were involved and co	prresponding dates on the
Activity		Dates

Personal Statement

Take some time to reflect on your church experience. Write a personal statement on a separate page. It can be as short or long as you wish. We are interested in the following:

- How has your relationship with the church influenced who you are now?
- Is there a church event or experience that has been especially meaningful to you?
- Are there ways that the First Presbyterian Church of Haddonfield could have better met your needs or the needs of young people in general?

References

Please provide the name and contact information of two persons who can serve as your reference in the space below. <u>Note:</u> Your references must be members of the First Presbyterian Church of Haddonfield who are not on staff

<u>Note:</u> Your references must be members of the First Presbyterian Church of Had are not on staff.
Reference 1:
Name:
Email:
Cell Phone Number:
Home Phone Number:
Reference 2:
Name:
Email:
Cell Phone Number:
Home Phone Number: