

**CHARLES W. TAYLOR AND LOIS H. TAYLOR SCHOLARSHIP
APPLICATION GUIDELINES**

In 1976, Mr. Charles Taylor established the CHARLES W. TAYLOR AND LOIS H. TAYLOR SCHOLARSHIP FUND of the First Christian Church (Disciples of Christ) of Winterset, Iowa. Mr. Taylor died in 1987 and provided that his estate should devote additional assets to the Fund. In the interest of impartiality and objectivity, First Christian Church has contracted with Higher Education & Leadership Ministries of the Christian Church (Disciples of Christ), located in St. Louis, Missouri, to administer the Fund.

Residents of Madison County, Iowa, who are also graduates of Madison County high schools are eligible to apply for financial assistance to attend any accredited technical school, community college, college, university, or graduate or professional school.

This financial grant comes in the form of a gift to apply towards educational related expenses. Repayment is not required, although we encourage those wishing to contribute to this fund to do so by contacting First Christian Church, 103 West Green Street, P.O. Box 166, Winterset, IA 50273.

The following points will assist you in filling out and submitting the application, so you are encouraged to read through them carefully before you begin.

1. Only residents of Madison County, Iowa, who are graduates of Madison County high schools are eligible.
2. Preference will be given to members of First Christian Church of Winterset, Iowa. However, active involvement in any local church will weigh in your favor.
3. Grant recipients shall be persons who have shown some responsibility and have indicated a firm desire for further training or education.
4. Grade point average is not a prime consideration, although satisfactory academic progress must be demonstrated before a grant can be awarded.
5. Forty percent of the award criteria is based on financial condition. All financial information must be filled in carefully and completely. Requested financial documents must be sent with applications postmarked by April 21, 2011. This information is for aid determination only. It will be held in confidence by Higher Education & Leadership Ministries and will not be used for any other purpose.
6. Your application will be evaluated in the following manner.
 - A. FINANCIAL NEED - 40 percent
 1. Gross costs of education each school year
 2. Net costs of education based on total financial aid package
 3. Student's contributed share to educational costs
 - B. PERSONAL QUALITIES - 25 percent
 1. Nature and attainability of career goals

2. Responsibilities assumed toward career goals
 3. Nature and breadth of community/extra curricular activities
 4. Response and quality of reference
- C. CHURCH MEMBERSHIP - up to 25%
1. Membership in a church - 5%
 2. Active membership in a church - 10%
 3. Membership in First Christian Church, Winterset IA - 15%
 4. Active membership in First Christian Church, Winterset IA -25%
 5. No church membership - 0%

7. The institution(s) to which you have applied for admission will be contacted for verification of acceptance to enroll, and an analysis of your financial aid package will be requested from the school. Therefore, it is imperative that you provide your name, Social Security Number, signature, and date, as well as filling in the Financial Aid Officer information box on the Verification of Acceptance and Financial Aid form and return to HELM with all other application materials **DO NOT MAIL THE VERIFICATION FORM TO THE SCHOOL.**

8. Three reference forms are included in this application. Each form shall be enclosed in a sealed envelope with the referee's signature across the seal. All three references must be returned with your application for the applicant to be considered.

9. These application materials must be enclosed in a single envelope postmarked no later than April 21, 2011.

10. The Scholarship Committee meets in mid-June each year to determine awards. Written notification regard-
- | | |
|---|---|
| a. the application and statement of purpose | e. the parents' 2010 Federal Tax Return (if the |
| b. the signed verification of enrollment form | applicant is under 23 years of age and single) |
| c. three references in sealed, signed envelopes | f. a transcript from your school. |
| d. the student's 2010 Federal Tax Return | |

It is the applicant's responsibility to ensure all required materials are included in the single envelope. You will be notified by e-mail when your packet is received by HELM. Your application will be considered **INCOMPLETE** if all the materials listed above are not postmarked by April 21, 2011.

★★★ Incomplete applications will not be considered for scholarship grants. ★★★

ing your grant request will be sent to you about July 15.

11. If you are awarded a grant, payment will be presented to you on the first Sunday in August during morning worship at First Christian Church, Winterset, IA. Your grant may be applied toward your tuition, books, and/or campus room and board.

12. Scholarship applicants may have applied in preceding years. Previous applications or reference forms cannot be used for current consideration. Please submit all new information each year.

All scholarship information and any questions regarding scholarship aid should be directed to:
Higher Education & Leadership Ministries
Christian Church (Disciples of Christ)

11477 Olde Cabin Road, Suite 310
St. Louis, MO 63141
(314) 991-3000 (314) 991-2957 (Fax)
helm@helmdisciples.org (E-mail)

N e w
Use this form if you did not receive a Taylor scholarship during the 2010-2011 academic year.

**CHARLES W. TAYLOR AND LOIS H. TAYLOR
SCHOLARSHIP APPLICATION**
HIGHER EDUCATION & LEADERSHIP MINISTRIES
CHRISTIAN CHURCH (DISCIPLES OF CHRIST)
11477 OLDE CABIN ROAD, SUITE 310
ST. LOUIS, MO 63141



**PLEASE USE BLACK
INK OR TYPEWRITER**

DEADLINE FOR APPLICATION: APRIL 21, 2011
★★ INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED ★★

I. GENERAL PROFILE

1. Student's _____
Name Last First Middle

2. County of Residence Upon High School Graduation _____

3. Student's _____
Residence Number, Street, Apartment Number Phone
During School Year
City County State Zip

4. Student's _____
Permanent Number, Street, Apartment Number Phone
Residence
City County State Zip

5. Date of Birth _____ 6. Gender _____
Month Day Year M F

7. E-mail address _____ 8. Marital status _____

9. Social Security Number _____

10. Mother, Stepmother, or Female Guardian's name: _____

Address _____

Occupation _____ Employer _____

Father, Stepfather, or Male Guardian's name: _____

Address _____

Occupation _____ Employer _____

II. EDUCATIONAL PROFILE

A. Name, Address, and County of High School from which student graduated

B. Name and Address of Institution(s) to which you have applied or been admitted for next fall (You may attach additional sheet if necessary)

Year of HS Graduation _____

Projected date of college graduation _____

C. Year in school for the 2011 fall term (mark one only) 1st 2nd 3rd 4th 5th Grad/Professional

D. Major Field of Study _____

E. Transcript: Ask your school to give you a transcript through your most recent semester. Include this transcript in your packet.

III. RELIGIOUS PROFILE

A. Denominational Affiliation _____

B. Home Church _____ Pastor _____

C. Positions of leadership you have held in the church

D. Church-related activities _____

IV. PARENTS' FINANCIAL INFORMATION

Note: For all applicants under the age of 23 and who are single, a copy of your parents' 2010 Federal Income Tax Return (Form 1040) must be included with the application, whether or not they claim you as a dependent. If an extension has been granted, submit copy of 2009's IRS 1040. Please note extraordinary circumstances in Statement of Purpose.

Net value of all assets, including savings accounts, investments as such as stocks and bonds, equity in house, etc.) _____

Note: If you have unusual expenses, please attach an additional sheet with explanation.

V. STUDENT'S INCOME AND EXPENSES

A. Student's estimated income (June 1, 2011, to May 31, 2012)

- 1. Summer earnings (May/June - August) _____
 - 2. Gross earnings in academic year (Sept - May) _____
 - 3. Gross annual earnings of spouse (if applicable) _____
 - 4. Financial assistance from applicant's/spouse's parents . . _____
 - 5. Total liquid assets of applicant (and spouse) _____
(Itemize assets here)
Savings and checking accounts above \$200 _____
Investments _____
Trust Fund income _____
Other income _____
 - 6. Other income (Specify: e.g. Social Security benefits or
Veteran's benefits. Attach additional sheet if necessary) _____
- TOTAL ESTIMATED INCOME . . . _____

Check one: Student filed 2010 Federal Income Tax Return (Form 1040)
and included a copy with application

Student did not file a tax return in 2010

NOTE: A copy of the Applicant's Federal Income Tax Return (Form 1040) is to be included with this application. If no tax return is filed, so state on this application. If an extension has been granted, submit copy of 2009's IRS 1040.

B. Student's estimated expenses (June 1, 2011, to May 31, 2012)

- 1. Tuition _____
 - 2. Fees _____
 - 3. Room or rent (including utilities) _____
 - 4. Board (or food costs) _____
 - 5. Books and educational supplies _____
- TOTAL ESTIMATED EXPENSES . . _____

C. Other financial implications

Is it necessary that you have an automobile for work and/or school?
If you will have a car, please list the make and year.

Yes _____ No _____ Make and year: _____

D. Total Household Educational Indebtedness to date _____

E. Number in college (how many in the household will be enrolled
in college full-time during the 2011-2012 academic year?) _____

F. Projected combined household educational expenses
for 2011-2012 _____

Describe special circumstances or needs relative to this application. (You may attach additional sheet if necessary.)

VI. CHARACTER AND LEADERSHIP

A. High School Activities (career clubs, drama, student government, athletics, social organizations, etc.) Indicate year(s) involved.

Fr, So, Jr, Sr Activity Position

B. Post-High School Activities (career clubs, drama, student government, athletics, social organizations, etc.) Indicate year(s) involved.

Fr, So, Jr, Sr Activity Position

C. Community Activities (scouting, 4H, FFA, service clubs, etc.) Indicate year(s) involved.

Fr, So, Jr, Sr Activity Position

D. Work Experience

Employer Position Held Years

VII. STATEMENT OF PURPOSE

On a separate sheet, please describe, in a concise paragraph, your present career direction and your plans for further education. Include information about yourself such as the vocation you plan to enter upon completion of your education program and any extraordinary factors to be considered by the Scholarship Committee.



Higher Education & Leadership Ministries

of the Christian Church—(Disciples of Christ)
11477 Olde Cabin Road, Suite 310
St. Louis, Missouri 63141

314-991-3000 fax 314-991-2957
www.helmdisciples.org
helm@helmdisciples.org

Verification of Acceptance and Financial Aid Form

Student Name _____ Social Security Number _____

Signature _____ Date _____

College/University name: _____

College/University address: _____

College/University city, state, and zip code: _____

STUDENTS: Stop here. Send this form with your application. DO NOT send it to your school.

Financial Aid Officer:

The student named above has applied for scholarship aid from funds available through Higher Education & Leadership Ministries of the Christian Church (Disciples of Christ) and has signed this form as authorization to release information.

In order to process the application we need information regarding this individual's financial aid and admission status. By filling out the appropriate spaces below you can assist us as we begin to make grant determinations. When completed, this form should be returned to the address listed above by **June 1, 2011**. If the information is not available by this time, please indicate when it will be. Your prompt attention to this matter is appreciated.

Thank you.

This student:

_____ Has been accepted for the 2011-2012 academic year.

_____ Has made application for the 2011-2012 academic year, but has not yet been accepted.

_____ Will be a full-time student _____ Will be a part-time student

Your Institution's Costs

Student's Financial Aid Package

Tuition and Fees	_____
Room	_____
Board	_____
Books	_____
Travel	_____
Other	_____
Total	_____

Institutional Aid	_____
Pell Grant	_____
SEOG	_____
Federal Work Study	_____
Perkins Loan	_____
Stafford Loan	_____
Other	_____
Total	_____

How will a scholarship from the Christian Church (Disciples of Christ) affect this student's financial aid package?

Signature of Official _____ Date _____

Institution _____ Telephone _____

HIGHER EDUCATION and LEADERSHIP MINISTRIES
CHRISTIAN CHURCH (DISCIPLES OF CHRIST)
 11477 Olde Cabin Road, Suite 310 – St. Louis, Missouri 63141
 Phone: (314) 991-3000 - Fax : (314) 991-2957

Student: _____ Date: _____

The student named above made application for a scholarship from available funds through Higher Education and Leadership Ministries, Christian Church (Disciples of Christ) and has requested that you be a reference. Please complete the following checklist identifying socialization skills, general character, academic ability, and capacity for relating to others. We realize that there are some sections you may not be able to complete. Use the back of this sheet for additional comments you wish to make.

Please return this form (1) to the applicant (2) in a sealed envelope with your signature over the seal (3) in time to be mailed by April 21, 2011. Thank you.

Name _____

Relationship to applicant _____ Number of years known _____

Signature _____ Date _____

	Superior	Good	Average	Poor	Don't Know
SOCIALIZATION SKILLS					
Participation in social activities					
Participation in community activities					
Participation in church activities					
Demonstration of leadership abilities					
GENERAL CHARACTER					
Demonstrates initiative					
Demonstrates creativity					
Takes personal responsibility					
Shows soundness of judgment					
ACADEMIC ABILITY					
Has realistic goals					
Demonstrates motivation towards goals					
Has academic ability					
Has academic potential					
Demonstrates logic and clarity					
CAPACITY FOR RELATING TO OTHERS					
Interacts well with others					
Is respectful of others					
Receives respect from others					

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CAPACITY FOR RELATING TO OTHERS					
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Is respectful of others					
Receives respect from others					



Charles W. Taylor and Lois H. Taylor Scholarship for graduates of high schools in Madison County, Iowa,

Double-check that all your materials are included.

★★★ Incomplete applications will not be considered for scholarship grants. ★★★



Completed application



Your signed
Verification of
Enrollment form



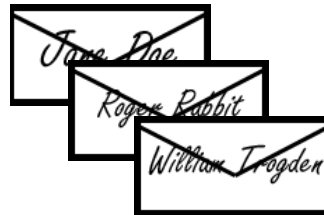
Statement of
purpose essay



Student's 2010 Federal
Tax Return



Parent(s)' 2010 Federal
Tax Return if applicant
is under 23 years of
age and single



3 letters of reference in
sealed, signed
envelopes



A transcript
provided by your
current school

**Mail all of these in a single envelope
with a postmark no later than April 21, 2011 to:**

**HELM
Taylor Scholarships
11477 Olde Cabin Road, Suite 310
St. Louis, MO 63141**

**Call 314-991-3000 or e-mail helm@helmdisciples.org
if you have questions.**

Grace and Peace!