



Interdenominational Ministers Conference  
of  
Greater Harrisburg  
P.O. Box 60221  
Harrisburg, PA 17106

## IMC Scholarship Application

### Scholarship Criteria

- High School Senior accepted to a four or two year accredited university, or technical college or
- College Student enrolled in a four or two year accredited university or technical college
- Student must have a 2.5 Grade Point Average (GPA) or higher
- Student must be a member of an IMC Church in the vicinity of Harrisburg, PA

### Application Process Requirements

Completed scholarship application that includes a copy of high school transcript or college transcript to support GPA listed on application and a copy of your college acceptance letter for high school Seniors.

### Where to send Application

Interdenominational Ministers Conference  
C/O Scholarship Committee  
P.O. Box 60221  
Harrisburg, PA 17106

### Application Deadline

Please refer to the IMC website for application postmark date

# IMC Scholarship Application

## Part I: Personal Data

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone \_\_\_\_\_ Cell \_\_\_\_\_

Email \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

Parent(s)/Guardian \_\_\_\_\_

## Part II: Educational Data

Check whichever applies:

High School Senior or College  Sophomore  Junior  Senior

City/State \_\_\_\_\_ GPA \_\_\_\_\_

Intended area of Study \_\_\_\_\_

## PART III: Church Involvement

Church Affiliation \_\_\_\_\_ Pastor \_\_\_\_\_

Church Activities	Office Held	Year

## Part IV: Honors/Awards

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**Part V: Scholarships (List any scholarships you will receive during the application year)**

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**Part VI: Extracurricular Activities: (High School or College)**

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**Community Service**

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**Part VIII: Essay**

**Please write or type a brief essay describing your relationship with God, your Church experience and what can the Church do for our Youth of today.**

*I hereby certify that all information provided in this application is true to the best of my knowledge and understand that any information found to be inaccurate or false will result in disqualification.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**OFFICIAL USE ONLY**

Received by: \_\_\_\_\_ Date: \_\_\_\_\_

## Pastor Letter of Recommendation

Using this sheet, the Scholarship Committee appreciates a brief statement (limit to one page) describing the applicant's strengths, character and his/her deserving of this scholarship. **Please return the completed recommendation to the applicant for submission with the scholarship packet.**

**Applicant Name:** \_\_\_\_\_

**Pastor's Name:** \_\_\_\_\_ **Address:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

## School Official Letter of Recommendation

Using this sheet, The Scholarship Committee appreciates a brief statement (limit to one page) describing the applicant's strengths, character and his/her deserving of this scholarship. **Please return the completed recommendation to the applicant for submission with the scholarship packet.**

**Applicant Name:** \_\_\_\_\_

**School Official Occupation:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Address:** \_\_\_\_\_ **Phone:** \_\_\_\_\_