



**New Mercies**  
*Christian Church*  
 Jesse Curney III Senior Pastor

Reviewed By Scholarship Committee Member

Name: \_\_\_\_\_ Date: \_\_\_\_\_

# Scholarship Program

4000 Five Forks Trickum Rd., Lilburn, GA 30047 ph: 770-925-8600 fx: 770-925-3400 www.newmerciessc.org

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

## Personal & High School Information

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I.: \_\_\_\_\_

D.O.B.: \_\_\_\_\_ Gender (check one):  M  F Are You A U.S. Citizen? (check one):  Yes  No

Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: (h) \_\_\_\_\_ (w) \_\_\_\_\_ (c) \_\_\_\_\_

E-mail: \_\_\_\_\_

Name of Parent(s) or Guardian(s): \_\_\_\_\_

High School Name: \_\_\_\_\_ County: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

## Collegiate Information

College/University You Plan To Attend: \_\_\_\_\_

Check the office the check will be issued to:  Bursar's Office  Admissions  Financial Aid  Students Accounts

Other: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

Anticipated Major Area of Concentration: \_\_\_\_\_ Anticipated Enrollment Date: \_\_\_\_\_

## Scholarship Information

To qualify, for scholarship consideration you must be a member of New Mercies Christian Church and attach the information listed below. Please attach the following information:

- A copy of your college acceptance letter and a brief statement to this application stating why you should receive this scholarship (include community activities, achievements, hobbies, clubs and/or organizations). Please state, if you are selected, what you would do to pay the scholarship forward.
- One letter of recommendation from a New Mercies, non-family member.
- List of ministries served or currently serving.
- Unofficial Transcript
- Write a statement of purpose explaining the following (max. 300 words):
  - Why you are pursuing your degree of choice and what you plan to do after graduation.
  - What makes you the best candidate to be awarded one of NMCC scholarships.

Scholarships from the list below that you are applying for: (Please Choose only two (2))

1<sup>st</sup> Choice: \_\_\_\_\_

2<sup>nd</sup> Choice: \_\_\_\_\_

**Note: Please email completed application and all required documents to [nextstep@newmerciessc.org](mailto:nextstep@newmerciessc.org) no later than May 18, 2020.**