Each year City of Angels Church of Religious Science is very pleased to offer scholarships to our qualified graduating seniors entering an academically accredited two or four year college or university. Preference is given to those students who meet the following conditions:

REQUIREMENTS AND APPLICATION PROCESS

A. REQUIRED FOR CONSIDERATION

- Copy of official high school transcript
- Personal interview with applicant and scholarship committee
- Photo, emailed or mailed, of yourself, which will be kept with your file
- Completed application package may be hand delivered or mailed to: City of Angels Church of Religious Science Attn: Scholarship Chairperson 6709 La Tijera Blvd. #214 Los Angeles, CA 90045

B. SELECTION CRITERIA

- At least 6 hours of verified church or community service prior to scholastic award
- A student graduating from the 12th grade at the end of the current school year and written acceptance to a 2 or 4 year college/university to pursue an undergraduate degree
- A minimum of 2.5 GPA
- List academic honors
- List extra curricula activities
- Submit a 200 word minimum typed autobiography essay which expresses your 5 year goals and your plan for achieving these goals. Include your interests, chief talents, accomplishments, employment, financial need and any other information you deem appropriate
- One letter of recommendation (from teacher, guidance counselor, or personal reference)

C. SCHOLARSHIP APPLICATION

Name		
Last	First	Middle
Email Address		

Home Address			
Street			
City	State	Zip Code	
Home Phone			
Cell Phone			
Student Address and Phor	ie When Attend	ling School:	
Street		City	
State	Zip Code	Cell Phone	
Social Security(last 4#s)_		Date of Birth	
Parent(s)			
or Guardian(s)			
Mother Occupation			
Father Occupation			
Guardian Occupation			
Parent/GuardianStree		p, Phone (cell, home)	
Parent		p) 1 110110 (con, 1101110)	
	State, Zip, Phon	ne (cell, home)	
Current High School			
High School Address			
Street, City,	State, Zip, Phon	ie (cell, home)	

Principal
School Telephone
Dates of Attendance
High School Graduation Date
List personal references by Name, Title, Phone
1)
2)
HIGH SCHOOL REPORT
Senior CounselorName, Telephone
List activities and offices held from grade 9 through 12
Activities
Office held
List honors and awards you have achieved and the year achieved
List community activities you have contributed/participated toward during your high school years

List honors classes you have taken

High School grade point ave	erage			
SAT scores?				
VerbalMath	Essay	Total	-	
COLL	EGE/UNIVERSIT	TY INFORMATION		
List the Name of the Univer	sity/College you	will be attending		
College University Financial Aid/ Scholarship Office				
Address, city, state, z	rip code, telepho	ne		
University Student ID numb	oer			
What is the Cost of Tuition Per Semester?				
What is the Cost of Books Per Semester?				
List All Your Forms of Finar	ıcial Aid			
Grants		Amounts		
Grants		Amounts		
Scholarships		Amounts		
Scholarships		Amounts		

Loans	Amounts
Loans	Amounts
Additional Aid for College Exp	penses Amounts
What is your EFC (Expected Family C	ontribution) toward your tuition and books?
What Amount Are You Requesting in Fund?	Financial Assistance From Our Scholarship
How did you hear of City Of Angels Cl	hildren's Charities Scholarship Foundation?
Submit a photo of yourself via USPS	mail or email to
cityofangelschurchrsinfo@yahoo.con	n
I am acknowledging that the informa	tion that is submitted on my application is true
Signature	Date
Parent/Guardian Signature	Date