



**BELLA MUNTEAN**  
**ANGEL HEART OF HOPE MINISTRY**  
 3620 Pelham Rd. #172  
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 Phone: 864.553.4793  
[brenda@angelheartofhope.org](mailto:brenda@angelheartofhope.org)  
[www.angelheartofhope.org](http://www.angelheartofhope.org)

## SCHOLARSHIP APPLICATION

**DEADLINE: Applications, transcript & Photo Release POSTMARKED or submitted by February 1<sup>st</sup>**

APPLICANT INFORMATION			
NAME:		PHONE:	
ADDRESS:			
NUMBER OF DEPENDENTS IN HOUSEHOLD:		HOUSEHOLD INCOME:	

ACADEMIC INFORMATION									
HIGH SCHOOL CURRENTLY ATTENDING:									
GRADE YOU ARE CURRENTLY IN:									
COLLEGE PLANNING TO ATTEND:									
CUMULATIVE GPA (on a 4.0 Scale )									
SAT TOTAL		SAT VERBAL				SAT MATH			
ACT TOTAL		ENG		MAT		READ		SCI	
If you have not taken ACT/SAT please explain why here:									

SCHOLASTIC HONORS/AWARDS RECEIVED IN HIGH SCHOOL		
<i>National Honors, National Merit, etc.</i>		
HONOR/AWARD	SCHOOL	YEAR

HIGH SCHOOL & OTHER CO-CURRICULAR ACTIVITIES/POSITION/TIME SPENT	DATES

BELLA MUNTEAN- ANGEL HEART OF HOPE SCHOLARSHIP APPLICATION

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<b>CHURCH &amp; MISSION ACTIVITIES</b> <i>Church Name, time spent, responsibilities</i>	<b>DATES</b>

<b>COMMUNITY ACTIVITIES</b> <i>Please include time spent, and position held.</i>	<b>DATES</b>

<b>PERSONAL ESSAY</b>
<ol style="list-style-type: none"><li>1. Write and attach a typewritten essay, 500 - 1000 words.</li><li>2. Please elaborate on any Mission trips/church work or community service, and the reasons for your involvement and what you have learned from these experiences.</li><li>3. Please describe the benefits of the scholarship and your goals and objectives for college.</li></ol>

<b>PHOTO RELEASE</b> <i>(Next Page)</i>
This will only be applicable for the chosen applicant if a photo is taken or used as part of the announcement.

**EMAIL COMPLETE APPLICATION by FEBRUARY 1<sup>st</sup>**

*(including essay & transcript)*

**to:**

[brenda@angelheartofhope.org](mailto:brenda@angelheartofhope.org)



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- website, social media, marketing materials, newsletters
- conference presentations & informational presentations
- educational presentations or courses
- on-line educational courses, educational videos

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There is no time limit on the validity of this release nor is there any geographic limitation on where these materials may be distributed. This release applies to photographic, audio or video recordings collected.

By signing this form, I acknowledge that I have completely read and fully understand the above release and agree to be bound thereby. I hereby release any and all claims against any person or organization utilizing this material for educational purposes.

<b>FULL NAME:</b>		<b>PHONE:</b>			
<b>STREET ADDRESS:</b>		<b>CITY:</b>		<b>ZIP:</b>	
<b>EMAIL:</b>					
<b>PHOTO TOPIC USE:</b>	<b>Scholarship applicant</b>				
<b>PERMISSION:</b>	<i>If this release is for a child under the age of 18, then the signature of parent/ legal guardian is required.</i>				
_____ Signature / Parent Signature			_____ Date		