

Scholarship Information  
American Baptist Women's Ministries of Idaho

TO: Central Association American Baptist Churches

FROM: Lois Skaug, Central Asso. Scholarship rep.  
(First Baptist Church) The Rock, Jerome, ID  
Email: [racearlois@msn.com](mailto:racearlois@msn.com)  
Phone: 208 316 3685

DATE: January 4, 2019

Enclosed are two (2) packets for the Idaho ABWM Scholarship. Each packet includes information, application form and recommendation forms. Please note that each student who applies will **need to submit (4) recommendation forms**. You may make copies of the recommendation form, application form, and information pages as needed.

All applications are to be **submitted to Lois Skaug by Saturday, March 30, 2019**. Address is on forms in packets.

Please see that eligible students from your church are given the opportunity to apply.

You and students may contact me if you have any questions.

**Idaho American Baptist Women's Ministries  
Scholarship Application Requirements**

**Application Due Date: Saturday, March 30, 2019**

All persons who are members of American Baptist Churches in southern Idaho may apply for the Idaho American Baptist Women's Ministries Scholarship.

**Application Requirements:**

Please submit the following items to the State Scholarship Chairperson:

1. A completed Application for Scholarship.
2. A copy of your school transcripts.
3. An autobiography of your life which should include an account of your Christian background, church/school/community activities, and your personal goals.
4. Recommendations from the following individuals – using the enclosed Recommendation Forms:
  - a. Your pastor, youth pastor, or chairman of the governing body in your church
  - b. An acquaintance outside of church
  - c. A school teacher
  - d. A person of your choice(Additional letters of recommendation are helpful but optional)  
Please submit to each of your evaluators, a stamped envelope addressed to the State Scholarship Chairperson.
5. A recent photo of yourself

Best wishes!

State Scholarship Chairperson  
Mary Hewes  
P.O. Box 12  
Arco, ID 83213  
(208) 527-8540  
hewesparents@hotmail.com

**(over)**

**Idaho American Baptist Women's Ministries**  
**Application for Scholarship**  
Scholarship - \$350.00  
**Applications Must Be Postmarked on or Before**  
**Saturday, March 30, 2019**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

Phone: Home (     ) \_\_\_\_\_ Cell (     ) \_\_\_\_\_ Age \_\_\_\_\_

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

Schools Attended \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Educational Goals \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Church Related Goals \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Schools you plan to attend \_\_\_\_\_

\_\_\_\_\_

Member of an American Baptist Church    Yes \_\_\_\_\_    No \_\_\_\_\_

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Local ABW Ministries Representative \_\_\_\_\_

Address \_\_\_\_\_

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

Phone (     ) \_\_\_\_\_

State Scholarship Chairperson

Mary Hewes

P.O. Box 12

Arco, ID 83213

(208) 527-8540

hewesparents@hotmail.com

Idaho American Baptist Women's Ministries  
Scholarship Recommendation

Applicant's Name: \_\_\_\_\_

Evaluator's Name: \_\_\_\_\_

Relation to Applicant: \_\_\_\_\_

Years you have known the Applicant: \_\_\_\_\_

**Please rate the applicant in the following categories:**

	Very Strong	Strong	Average	Weak	Very Weak	No opportunity to observe
Dependability						
Accepts Responsibility						
Accepts others						
Ability to get Along w/others						
Ability to work in a group						
Able to accept Suggestions or Criticism						
Courtesy						
Takes initiative						
Prompt in meeting Obligations ,						
Commitment to a Life goal						
Exercises personal Faith in daily living						

**You may submit a separate sheet of paper to include additional comments that would aid in awarding the scholarship.**

**Please complete recommendation and return by Saturday, March 30, 2019 to**

**Please mail directly to:**

State Scholarship Chairperson  
Mary Hewes  
P.O. Box 12  
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