



## 2019 Johnelle West Scholarship

The Church Without Walls (TCWW) provides the Johnelle West Scholarship as a resource to members of our congregation who need financial assistance to aid in continuing their education. The TCWW Scholarship Committee will review each application that meets the following requirements:

- Applicant must be an active member of The Church Without Walls for at least one year.
- Applicant must demonstrate a Christian lifestyle.
- Applicant must complete an interview with the TCWW Scholarship Committee.

### **Application Process**

To apply for the 2019 Johnelle West Scholarship, students must meet the following criteria and submit the following to the TCWW Scholarship Committee. The omission of any of the listed criteria and/or documents will result in an incomplete application and will not be considered for the scholarship.

#### *High School Graduates*

- Completed TCWW 2019 Scholarship Application
- Official high school transcript with a 3.2 GPA or higher, mailed to TCWW from your graduating high school. Transcript must have the official seal.
- Letter of acceptance from an accredited college or university
- Two recommendation forms:
  1. From a church member
  2. From a non-church member (i.e. teacher, coach, employer, etc.), mailed to TCWW or submitted electronically to [jrios@churchwithoutwalls.org](mailto:jrios@churchwithoutwalls.org) directly from the person making the recommendation
- Essay of 600 words  
**Essay Topic: How have you used your strengths and talents for the church, your community, and your school?**

### *College Students*

- Completed TCWW 2019 Scholarship Application
- Official, current transcript with a 3.2 GPA or higher, mailed to TCWW from your current university. Transcript must have official seal.
- Two recommendation forms:
  1. From a church member
  2. From a non-church member (i.e. professor, coach, employer, etc.), mailed to TCWW or submitted electronically to [jrios@churchwithoutwalls.org](mailto:jrios@churchwithoutwalls.org) directly from the person making the recommendation
- Essay of 1000 words  
**Essay Topic: How are you prepared to handle the different philosophies among college students that question the principles of Christianity?**

### **Application Submission**

Completed TCWW scholarship application packets must be mailed to:

The Church Without Walls  
ATTN: Janice Rios  
5725 Queenston Blvd  
Houston, TX 77084

### **Application Deadline**

Completed, TCWW 2019 Scholarship Application packets must be received and/or postmarked by  
**Friday, July 19, 2019.**



Ralph D. West  
Pastor/Founder

## 2019 Johnelle West Scholarship Application

### SECTION A: Personal Information

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

Main Phone: \_\_\_\_\_ Alt Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Employer: \_\_\_\_\_

Employer Address: \_\_\_\_\_

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

### SECTION B: TCWW Involvement

How many years have you been a member of TCWW? \_\_\_\_\_

List any TCWW ministries you have served.

Ministry Name: \_\_\_\_\_ Leader: \_\_\_\_\_

Ministry Leader Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Date(s) Served: \_\_\_\_\_

Ministry Name: \_\_\_\_\_ Leader: \_\_\_\_\_

Ministry Leader Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Date(s) Served: \_\_\_\_\_

**SECTION C: High School Graduate Academic Information**

Name of Graduating High School: \_\_\_\_\_

Address of Graduating High School: \_\_\_\_\_

\_\_\_\_\_

High School Graduation Date: \_\_\_\_\_

Date of GED Completion: \_\_\_\_\_

Name of Anticipated College/University: \_\_\_\_\_

Address of College/University: \_\_\_\_\_

\_\_\_\_\_

College Course of Study (Major): \_\_\_\_\_

Estimated Semester Tuition at Anticipated College/University: \$ \_\_\_\_\_

**SECTION D: Current College Student Academic Information**

Name of College/University: \_\_\_\_\_

Address of College/University: \_\_\_\_\_

Classification: \_\_\_\_\_

Current GPA: \_\_\_\_\_

Expected Graduation Date: \_\_\_\_\_

Major of Study: \_\_\_\_\_

Semester Tuition: \$ \_\_\_\_\_

**SECTION E: Honors and Awards Received**

Honors/Award: \_\_\_\_\_ Date Received: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Honors/Award: \_\_\_\_\_ Date Received: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Honors/Award: \_\_\_\_\_ Date Received: \_\_\_\_/\_\_\_\_/\_\_\_\_

**SECTION F: Volunteer and Community Service**

Location: \_\_\_\_\_  
Supervisor: \_\_\_\_\_ Phone: \_\_\_\_\_  
Date(s): \_\_\_\_\_  
Location: \_\_\_\_\_  
Supervisor: \_\_\_\_\_ Phone: \_\_\_\_\_  
Date(s): \_\_\_\_\_  
Location: \_\_\_\_\_  
Supervisor: \_\_\_\_\_ Phone: \_\_\_\_\_  
Date(s): \_\_\_\_\_

**SECTION F: Application Certification**

I certify that the information on this application for scholarship is accurate and true. I understand that application does not automatically result in a scholarship award. I understand that omission of any requested information or documentation will result in disqualification of my application.

_____	_____	_____
Student Name	Student Signature	Date
_____	_____	_____
Parent Name	Parent Signature (If Student is a Minor)	Date



## 2019 Johnelle West Scholarship Recommendation Letter Request

### **Applicant Section:**

*(To be completed by Applicant)*

Name of Applicant: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

### **Recommendation Section:**

Full Name: \_\_\_\_\_

Business or Institution: \_\_\_\_\_

Years at TCWW: \_\_\_\_\_ Position or Ministry: \_\_\_\_\_

*(If Applicable)*

Phone: \_\_\_\_\_ Signature: \_\_\_\_\_

Please provide a recommendation letter to include the following regarding the Applicant:

1. How long have you known the Applicant and in what capacity?
2. What are the Applicant's gifts/talents/competencies as you have encountered them?
3. What are the Applicant's strengths and weaknesses?
4. What allows you to think the Applicant will be able to have success in their academic pursuits?

Please mail this form and your recommendation letter by **Friday, July 19, 2019** to:

The Church Without Walls  
ATTN: Janice Rios  
5725 Queenston Blvd  
Houston, TX 77084

or send electronically to:

[jrios@churchwithoutwalls.org](mailto:jrios@churchwithoutwalls.org)



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